

Period	PeriodStart	PeriodEnd	spec_name	min_outcome	diag_proc	reason_for_denial	indication_offered	auth_count	Year	Quarter
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	5	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected blood vessel abnormality (AVM, aneurysm) with documented new or changing signs and or symptoms best describes the reason that I have requested this test.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is not suspicion of neoplasm, or metastasis.ostct"; This is a preoperative or recent postoperative evaluation.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is suspicion of neoplasm, tumor or metastasis.fct"; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for follow-up to trauma.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70490 Computed tomography, soft tissue neck; without contrast material		Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; unknown; There has been treatment or conservative therapy.; pain , numbness, weakness; Medication, home exercise; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022		Advanced Practice Registered Nurse	Approval	70490 Computed tomography, soft tissue neck; without contrast material		He still reports a dry mouth, but otherwise, denies any further complaints. He had;mediastinal nodal recurrence that he received SBRT in December; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Per US Results an 11 mm ovoid cystic structure is seen along the anterior margin of the trachea in the midline below the level of the thyroid gland at the site of palpable abnormality.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04-26-2022; There has not been any treatment or conservative therapy.; mass felt midline neck/throat area, mass seen as well. An 11 mm cystic structure along the anterior trachea below the level of the thyroid gland suggesting MRI per US findings.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6-9-22; There has been treatment or conservative therapy.; Stroke like symptoms; Blood work Heart work-upHead CT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6-9-22; There has been treatment or conservative therapy.; Stroke like symptoms; Blood work Heart work-upHead CT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Multiple sclerosis, monitor ;reassess disease burden of multiple sclerosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/28/2021; There has been treatment or conservative therapy.; Neuromyelitis optica spectrum disorder; Conservative therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	respiratory arrest. CPR was preformed and stable; This study is being ordered for trauma or injury.; 06/07/2022; There has not been any treatment or conservative therapy.; Pain on left side of head, weakness on left side, syncope episodes.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Chronic headache, longer than one month describes the headache's character.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Worst headache of the patient's life with sudden onset in the past 5 days describes the headache's character.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected blood vessel abnormality (AVM, aneurysm) with documented new or changing signs and or symptoms best describes the reason that I have requested this test.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected multiple sclerosis (MS) best describes the reason that I have requested this test.; The patient has been diagnosed with known Multiple Sclerosis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has vision changes.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is NOT a new/initial evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient had an audiogram.; The results of the audiogram were abnormal.; It is unknown why this study is being ordered.; The patient has hearing loss.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has the inability to speak.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed more than 10 months ago.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed more than 12 months ago	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; This study is being ordered as a 12 month annual follow up.; This is a routine follow up.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has NOT been a change in seizure pattern or a new seizure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250 Computed tomography, thorax; without contrast material	; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Abnormal imaging (xray) finding was relevant in the diagnosis or suspicion of vascular disease; This is a request for a Chest CT.; This study is being requested for known or suspected blood vessel (vascular) disease; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; An abnormal imaging (xray) finding led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Surveillance of a known cancer following treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250 Computed tomography, thorax; without contrast material	01/31/2022; There has been treatment or conservative therapy.; CHEST PAIN, ANEMIA; ENDOSCOPY, BONE MARROW BIOPSY, DIAGNOSED WITH SARCOIDOSIS, PREDNISONE, PROTONIX; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250 Computed tomography, thorax; without contrast material	02/11/2022; There has been treatment or conservative therapy.; High grade endometrial cancer; Chemotherapy;Neoadjuvant carbo/taxol; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	03/25/2021; There has been treatment or conservative therapy.; esophageal cancer.; esophagectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	04/03/2015; There has been treatment or conservative therapy.; lung cancer; Chemotherapy;Radiation;Surgery;Immunotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	05/01/2019; There has been treatment or conservative therapy.; NONE; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	6/3/2019; There has been treatment or conservative therapy.; FLANKPAIN, HEMATURIA; right, nephrectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	07/26/2020; There has been treatment or conservative therapy.; INSOMNIA, ANXIETY, DEPRESSION, DECREASED LIBIDO; Sigmoid colon mass biopsy 07/26/2020:: Moderately differentiated invasive adenocarcinoma.;MSI stable. MMR with intact nuclear expression with low probability of MSI-H.;Sigmoid colectomy with appendectomy 07/28/2020:moderately differentiated colonic aden; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	09/01/2019; There has been treatment or conservative therapy.; epigastric discomfort; ;Nodular sclerosis Hodgkin lymphoma of solid organ excluding spleen ;;Classical Hodgkin lymphoma (HCC); ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	09/10/2020; There has been treatment or conservative therapy.; VIT V DEFICIENCY, DIZZINESS AND GIDDNESS, NEUROPATHY; Carboplatin, Taxol X 3 cycles, adjuvant.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	12/06/2017; There has been treatment or conservative therapy.; please see clinicals; please see clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; Abnormal finding on physical examination was relevant in the diagnosis or suspicion of inflammatory bowel disease; This is a request for a Chest CT.; This study is being requested for known or suspected blood vessel (vascular) disease; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	Coughing up blood (hemoptysis) describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	He still reports a dry mouth, but otherwise, denies any further complaints. He had;mediastinal nodal recurrence that he received SBRT in December; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	PULMONARY NODULES; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71250	Computed tomography, thorax; without contrast material	This is a request for a Thorax (Chest) CT.; Abnormal imaging test describes the reason for this request.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; It is unknown if the patient is presenting with pulmonary signs or symptoms of lung cancer or if there are other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	71555	Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	; This study is being ordered for Congenital Anomaly.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72125	Computed tomography, cervical spine; without contrast material	The patient does not have any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72125	Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to follow-up surgery or fracture within the last 6 months.; The patient has been seen by, or the ordering physician is, a neuro-specialist, orthopedist, or oncologist.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72128 Computed tomography, thoracic spine; without contrast material	Back pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2020; There has been treatment or conservative therapy.; Back pain/ radiculopathy, thoracic and lumbar radiculopathy. ;Pain is described as sharp and burning with radiation, was rated as 10/10 patient states that pain is gradually worsening; HEP, medication, epidural injection; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72128 Computed tomography, thoracic spine; without contrast material	The patient does have neurological deficits.; This is a request for a thoracic spine CT.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting lower extremity weakness.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72131 Computed tomography, lumbar spine; without contrast material	Back pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2020; There has been treatment or conservative therapy.; Back pain/ radiculopathy, thoracic and lumbar radiculopathy. ;Pain is described as sharp and burning with radiation, was rated as 10/10 patient states that pain is gradually worsening; HEP, medication, epidural injection; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; unknown; There has been treatment or conservative therapy.; pain , numbness, weakness; Medication, home exercise; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Multiple sclerosis, monitor ;reassess disease burden of multiple sclerosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/28/2021; There has been treatment or conservative therapy.; Neuromyelitis optica spectrum disorder; Conservative therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	PT FELL AND SNAPPED NECK, SEVERE PAIN, HEADACHE, CANNOT CONCENTRATE; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Known or suspected infection or abscess	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Multiple sclerosis, monitor ;reassess disease burden of multiple sclerosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/28/2021; There has been treatment or conservative therapy.; Neuromyelitis optica spectrum disorder; Conservative therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	PT FELL AND SNAPPED NECK, SEVERE PAIN, HEADACHE, CANNOT CONCENTRATE; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; It is not known if there is weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient has not been treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Known Tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Pre-Operative Evaluation; It is not known when surgery is scheduled.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Suspected Tumor with or without Metastasis; There is evidence of tumor or metastasis on a bone scan or x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; None of the above has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 10 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Ice and/or heat has been used for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Cannot agree/affirm; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered as a follow-up to trauma.; "The ordering physician is a gastroenterologist, urologist, gynecologist, or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of pelvic inflammatory disease or abscess.; Yes, this is a preoperative study.; It is not known if surgery is planned for within 30 days.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	unknown; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is suspicion of upper extremity neoplasm or tumor or metastasis.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	EMG/nerve velocity study performed by Dr. Ironside suggested a possible C6 radiculopathy but no obvious ulnar nerve abnormalities and no signs of carpal tunnel syndrome.;;A previous MRI of the left elbow showed an abnormal thickening and signal abnormal; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6/1/2021; There has been treatment or conservative therapy.; Right-hand-dominant patient presented 3 months ago with bilateral extremity peripheral neuropathies that are more ulnar nerve than other but not completely just the ulnar nerve.; NSAIDs, analgesics, activity modification, OT/PT, bracing, prescription meds, pain management injections, and surgery.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is a history of upper extremity trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	EMG/nerve velocity study performed by Dr. Ironside suggested a possible C6 radiculopathy but no obvious ulnar nerve abnormalities and no signs of carpal tunnel syndrome.;;A previous MRI of the left elbow showed an abnormal thickening and signal abnormal; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6/1/2021; There has been treatment or conservative therapy.; Right-hand-dominant patient presented 3 months ago with bilateral extremity peripheral neuropathies that are more ulnar nerve than other but not completely just the ulnar nerve.; NSAIDs, analgesics, activity modification, OT/PT, bracing, prescription meds, pain management injections, and surgery.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient reports last week he noticed an increase in swelling and pain to this area. Patient denies any acute injury. X-rays and CT scan taken at National Park Medical Center show a nondisplaced fracture extending to the ulnar proximal aspect of the lunate; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for staging.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has not been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; two months of home exercise with no change	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has not directed conservative treatment for the past 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for follow-up.; The study is requested to detect residual cancer after a course of treatment has been completed?	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were abnormal.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis; There is no suspicion of lower extremity bone or joint infection.; There is not a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip."; There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is NOT being planned nor has one already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is not a history of new onset of severe pain in the ankle within the last two weeks.; The patient does not have an abnormal plain film study of the ankle other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; There is not a suspected tarsal coalition.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has been treated with anti-inflammatory medications in conjunction with this complaint.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is not a history of new onset of severe pain in the ankle within the last two weeks.; The patient does not have an abnormal plain film study of the ankle other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; There is not a suspected tarsal coalition.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has been treated with anti-inflammatory medications in conjunction with this complaint.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is not a history of new onset of severe pain in the ankle within the last two weeks.; The patient had an abnormal plain film study of the ankle other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; There is a suspected tarsal coalition.; The patient has been treated with and failed a course of supervised physical therapy.; The patient has been treated with anti-inflammatory medications in conjunction with this complaint.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is not a history of new onset of severe pain in the ankle within the last two weeks.; The patient had an abnormal plain film study of the ankle other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; There is a suspected tarsal coalition.; The patient has been treated with and failed a course of supervised physical therapy.; The patient has been treated with anti-inflammatory medications in conjunction with this complaint.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for known fracture.; The study is being ordered to evaluate a possible non union fracture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a protective boot for at least 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An Ultrasound showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; 'None of the above' were noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Lachmann's test or "drawer" sign (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has not failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; Tendon or ligament injury is not suspected.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74150 Computed tomography, abdomen; without contrast material	PULMONARY NODULES; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient does not have new symptoms including hematuria, new lab results or other imaging studies including ultrasound, doppler or x-ray (plain film) findings, suspicion of an adrenal mass or suspicion of a renal mass.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a vascular disease.; The requested studies are being ordered for known or suspected blood clot, thrombosis, or stenosis and are being ordered by a surgeon or by the attending physician on behalf of a surgeon.; Yes this is a request for a Diagnostic CT.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc.; There are no findings of Hematuria, Lymphadenopathy, weight loss, abdominal pain, diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	01/31/2022; There has been treatment or conservative therapy.; CHEST PAIN, ANEMIA; ENDOSCOPY, BONE MARROW BIOPSY, DIAGNOSED WITH SARCOIDOSIS, PREDNISONE, PROTONIX; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	02/11/2022; There has been treatment or conservative therapy.; High grade endometrial cancer; Chemotherapy; Neoadjuvant carbo/taxol; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	03/25/2021; There has been treatment or conservative therapy.; esophageal cancer.; esophagectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	04/03/2015; There has been treatment or conservative therapy.; lung cancer; Chemotherapy; Radiation; Surgery; Immunotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	05/01/2019; There has been treatment or conservative therapy.; NONE; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	07/26/2020; There has been treatment or conservative therapy.; INSOMNIA, ANXIETY, DEPRESSION, DECREASED LIBIDO; Sigmoid colon mass biopsy 07/26/2020:: Moderately differentiated invasive adenocarcinoma.;MSI stable. MMR with intact nuclear expression with low probability of MSI-H.;Sigmoid colectomy with appendectomy 07/28/2020:moderately differentiated colonic aden; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	09/01/2019; There has been treatment or conservative therapy.; epigastric discomfort; ;Nodular sclerosis Hodgkin lymphoma of solid organ excluding spleen ;;Classical Hodgkin lymphoma (HCC) ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	09/10/2020; There has been treatment or conservative therapy.; VIT V DEFICIENCY, DIZZINESS AND GIDNESS, NEUROPATHY; Carboplatin, Taxol X 3 cycles, adjuvant.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	12/06/2017; There has been treatment or conservative therapy.; please see clinicals; please see clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	He still reports a dry mouth, but otherwise, denies any further complaints. He had;mediastinal nodal recurrence that he received SBRT in December; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for ketones; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam are unknown.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	6	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for organ enlargement.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; The abnormality found on a previous CT, MRI or Ultrasound was not in the liver, kidney, pancreas or spleen.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a renal cyst.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	; This study is being ordered for Congenital Anomaly.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done.; The patient has 3 or more cardiac risk factors.; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Enter answer here - or Type In Unknown If No Info Given. This is a request for Breast MRI.; This study is being ordered for something other than known breast cancer, known breast lesions, screening for known family history, screening following genetic testing or a suspected implant rupture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are benign lesions in the breast associated with an increased cancer risk.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	77078 Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	This is a request for a Bone Density Study.; This patient has not had a bone mineral density study within the past 23 months.; This is a bone density study in a patient with clinical risk of osteoporosis or osteopenia.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	The patient did NOT have a prior CABG.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic /coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress.; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin.; The patient has None of the above.; The patient has None of the above physical limitations.; The patient has NOT had a recent stress imaging study within the last year.; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block.; The patient has NOT had a prior stent.; The patient does NOT have documented ejection fraction on prior TTE (Transthoracic Echocardiogram) of less than 40%	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Don't know or Other than listed above best describes the reason for ordering this study	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known left bundle branch block as documented on an EKG and has been interpreted by a Cardiologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is Left Anterior Descending	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Melanoma.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 3 or younger.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of an abnormal heart rhythm.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of congenital heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1, 2 or 3 years since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Moderate stenosis or moderate regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1 year since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Moderate stenosis or moderate regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery; It has been more than 3 years since the last Transthoracic Echocardiogram (TTE) was completed; The patient is asymptomatic	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; This study is being ordered for symptoms of a heart problem	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; It is unknown what type of cardiac valve conditions apply to this patient.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has NOT been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The atrial fibrillation and/or atrial flutter is pre-existing.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This is a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of atrial fibrillation or flutter to determine the presence or absence of left atrial thrombus or evaluate for radiofrequency ablation procedure.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a history of Coronary Artery Bypass Surgery (CABG); The ordering MDs speciality is not Cardiology or Cardiac Surgery; The last Stress Echocardiogram or Myocardial Perfusion Imaging procedure was performed greater than 12 months	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93350 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;		This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Approval	93350 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;		This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' describes the headache's character.; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected blood vessel abnormality (AVM, aneurysm) with documented new or changing signs and or symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	respiratory arrest. CPR was preformed and stable; This study is being ordered for trauma or injury.; 06/07/2022; There has not been any treatment or conservative therapy.; Pain on left side of head, weakness on left side, syncope episodes.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is immune-compromised.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; It is unknown if surgery is scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04-29-2022; There has been treatment or conservative therapy.; She feels that most of the time her headaches start in the back of the neck and go up; Imitrex 100 MG Oral Tablet as directed. 1 TAB BY MOUTH AT FIRST SIGN OF MIGRAINE. MAY REPEAT DOSE IN 2 HOURS IF INEFFECTIVE. MAX DOS 2/24 HOURS, 30 days, 3 refills; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04-29-2022; There has been treatment or conservative therapy.; She feels that most of the time her headaches start in the back of the neck and go up; Imitrex 100 MG Oral Tablet as directed. 1 TAB BY MOUTH AT FIRST SIGN OF MIGRAINE. MAY REPEAT DOSE IN 2 HOURS IF INEFFECTIVE. MAX DOS 2/24 HOURS, 30 days, 3 refills; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	05/06/22 FIRST OFFICE VISIT; There has been treatment or conservative therapy.; HEADACHES, VISION CHANGES, CERVICALGIA AND RADICULOPATHY; PATIENT GIVE TIZANIDINE, PREDNISONE, AND GABAPENTIN; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Suspected brain tumor best describes the patient's tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	05/20/21; There has been treatment or conservative therapy.; dramatic weight loss; colonoscopy, chest, x-ray, labs which all were normal; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; The patient is 49 years old or younger.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; This study is being requested for 'none of the above'; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; Enter date of initial onset here - or Type In Unknown If No Info Given There has been treatment or conservative therapy.; chest pain , joint pain; PT and medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Thorax (Chest) CT.; Chest pain describes the reason for this request.; Another abnormality is related to the suspicion of cancer in this patient.; This study is being requested for suspected cancer or tumor.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	COPD and worsening shortness of breathe; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	This study is being ordered for inflammatory disease.; The ordering physician is not a surgeon or pulmonologist.; There is radiologic evidence of non-resolving pneumonia after at least 4 weeks of treatment.; This is a request for a chest MRI.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	Needed to evaluate continued neck pain w/left sided symptoms; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	trauma protocol, so that's CT head and neck. It's to rule out vertebral fracture; The patient does not have any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to trauma or acute injury within 72 hours; There is a reason why the patient cannot have a Cervical Spine MRI.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72128 Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	compression fracture suspected, abnormal x ray; This is a request for a thoracic spine CT.; There is no reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72128 Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	Neurosurgeon who did surgery suggested CT scan as the thoracic pain is radiating around the chest. Maybe be related to previous hardware.; This study is being ordered for a neurological disorder.; 3/2022; There has not been any treatment or conservative therapy.; Thoracic pain - coming from post surgical site. Low back pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72128 Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	The patient does have neurological deficits.; This is a request for a thoracic spine CT.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting abnormal gait.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	Neurosurgeon who did surgery suggested CT scan as the thoracic pain is radiating around the chest. Maybe be related to previous hardware.; This study is being ordered for a neurological disorder.; 3/2022; There has not been any treatment or conservative therapy.; Thoracic pain - coming from post surgical site. Low back pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; bilateral legs from back pain, neuropathy in lower extremities from back pain; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; decreased balance; weakness in extremities; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; There is tingling and numbness; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; None of the above; It is not known if the patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has had back pain for over 4 weeks.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; There has not been any treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	05/06/22 FIRST OFFICE VISIT; There has been treatment or conservative therapy.; HEADACHES, VISION CHANGES, CERVICALGIA AND RADICULOPATHY; PATIENT GIVE TIZANIDINE, PREDNISONE, AND GABAPENTIN; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	abnormal xrays; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	CT HEAD: NO ACUTE INTERCRANIAL FINDINGS. CONSIDER MRI OF BRAIN IF FURTHER CLINICAL CONCERN; 4/20/2022; There has been treatment or conservative therapy.; WEAKNESS OF BOTH LOWER EXTREMITIES WITH SENSORY LEVEL CONCERN FOR TRANSVERSES MYELITIS; IV STEROIDS. MEDICATION; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Initial onset of severe headaches started 06/22/2019 at work during a police training exercise. Another individual pulled her by the neck very hard causing C5 C6 damage. She has had 2 surgeries on her neck related to this issue. She reports hx of concuss; There has been treatment or conservative therapy.; She also complains of tightness and tension in her neck and shoulders that seems to trigger severe headaches. We reviewed and discussed abnormal labs that showed slight elevation in WBCs. Most severe headaches start at the base of her skull then spread to; She has tried gabapentin and tizanidine. She stopped the gabapentin because it made her feel moody. She reports tizanidine helps relax muscles, but not the headaches. ;Baclofen didn't help relieve dull headaches and neck tension. She has tried and failed; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has degenerative disc disease, chronic low back pain. Patient fell last week and has exacerbated symptoms with pain radiating down right leg. Patient was ordered rest and medications for pain/inflammation.; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	preoperative evaluation; unknown; There has been treatment or conservative therapy.; neck pain, low back pain, headache, numbness of arms and pain that radiates down legs; medication, home exercises, physical therapy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	CT HEAD: NO ACUTE INTERCRANIAL FINDINGS. CONSIDER MRI OF BRAIN IF FURTHER CLINICAL CONCERN; 4/20/2022; There has been treatment or conservative therapy.; WEAKNESS OF BOTH LOWER EXTREMITIES WITH SENSORY LEVEL CONCERN FOR TRANSVERSES MYELITIS; IV STEROIDS. MEDICATION; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has not seen the doctor more than once for these symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has not been any treatment or conservative therapy.; ; ; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; several years; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	abnormal xrays; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has degenerative disc disease, chronic low back pain. Patient fell last week and has exacerbated symptoms with pain radiating down right leg. Patient was ordered rest and medications for pain/inflammation.; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	preoperative evaluation; unknown; There has been treatment or conservative therapy.; neck pain, low back pain, headache, numbness of arms and pain that radiates down legs; medication, home exercises, physical therapy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; The patient has None of the above	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	14 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	7 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	11 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73200 Computed tomography, upper extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is not suspicion of upper extremity bone or joint infection.; The ordering physician is not an orthopedist or rheumatologist.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	ELBOW PAIN, WORSEN WITH MOVEMENT, CONSTANT THROUGHOUT THE DAY LIFTING INJURY; The pain is from an old injury.; The member has not failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	PATIENT IS POSITIVE FOR ARTHRALGIAS, JOINT SWELLING, AND MYALGIAS.; The pain is from a recent injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; It is not known if there is a suspicion of fracture not adequately determined by x-ray.; It is not known if there is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The pain is from an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has not directed conservative treatment for the past 4 weeks.	2 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; Enter date of initial onset here - or Type In Unknown If No Info Given There has been treatment or conservative therapy.; chest pain , joint pain; PT and medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 9/26/2021; There has been treatment or conservative therapy.; joint pain, abnormal reflexes; medications and home exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They did not have 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has not had a recent bone scan.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Will fax addl clinicals if needed; This study is being ordered for trauma or injury.; March 7th, 2022; There has been treatment or conservative therapy.; Primary for the right leg is a known healing wound, pain, swelling and redness, fever in the legPrimary for the knee swelling, decrease range of motion, burning and tingling pain; Antibiotic creams, peels, and anti inflammatory medication, Home instructed therapy, ice and heat, he has also received steroid injection in his knee. They had done x rays of the lower extremity and the lower knee. The leg wound is not healing, trying to; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; several years; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; Lower Back and Leg/Hip Pain. Patient describes the pattern of pain as constant with intermittent flare ups.; medication, decreased physical activity, epidural steroid injections; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a kidney/ureteral stone.; This patient is not experiencing hematuria.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This is a request for CT Angiography of the Abdomen and Pelvis.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	05/2021; There has been treatment or conservative therapy.; dramatic weight loss; colonoscopy, chest, x-ray, labs which all were normal; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	6/3/2019; There has been treatment or conservative therapy.; FLANKPAIN, HEMATURIA; right, nephrectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; It is not known if this is the first visit for this complaint.; It is unknown if there has been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; It is not known if this is the first visit for this complaint.; It is unknown if there has been a physical exam.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); r/o abnormal weight gain; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for known or suspected infection.; There are NO physical findings or abnormal blood work consistent with peritonitis, pancreatitis or appendicitis.; There is active or clinical findings of ulcerative colitis, bowel inflammation or diverticulitis.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Congenital Anomaly.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	75571 Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This is a request for a CT scan for evaluation of coronary calcification.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered as a post operative evaluation.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of an abnormal heart rhythm.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; The murmur is NOT described as grade 3/6 or greater; It is unknown if there are clinical symptoms supporting a suspicion of structural heart disease; This a request for the initial evaluation ; The study is being ordered for Evaluation of a Murmur	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; There has NOT been a change in clinical status since the last echocardiogram.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; There are NOT clinical symptoms supporting a suspicion of structural heart disease.; This is a request for follow up of a known murmur.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Advanced Practice Registered Nurse	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; Routine follow up of patient with previous history of ischemic/ coronary artery disease without new or changing symptoms best describes the patients clinical presentation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Allergy & Immunology	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has NOT been completed; This Interstitial Lung Disease is suspected	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Allergy & Immunology	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Allergy & Immunology	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Ambulatory/Walk-in Clinic	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Ambulatory/Walk-in Clinic	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Ambulatory/Walk-in Clinic	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; It is unknown if surgery is scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Ambulatory/Walk-in Clinic	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	71250 Computed tomography, thorax; without contrast material		Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)		Rule Out:BRACHIAL PLEXOPATHY;;Contrast Route (if applicable):Intravenous;;Clinical Indication:RULE OUT BRACHIAL PLEXOPATHY;;Notes: NEED TO IMAGE BRACHIAL PLEXUS; This study is NOT being ordered for a Work-up for Suspicious Mass, Known Tumor, Known or Suspected Inflammatory Disease, etc...; This is a request for a chest MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72125 Computed tomography, cervical spine; without contrast material		It is not known if the patient has any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; The patient is experiencing sensory abnormalities such as numbness or tingling.; There is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72125 Computed tomography, cervical spine; without contrast material		The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Asymmetric reflexes.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Lower extremity weakness.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does not have any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is reflex abnormality.; ; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Patient complaint; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; other medications as listed.; Current Medication;pregabalin 50 mg capsule 1 Twice A Day for 30 Days , Prescribe 60 Capsule;Ozempic 1 mg/dose (4 mg/3 mL) subcutaneous pen injector x 28 Days;atorvastatin 80 mg tablet x 30 Days;glipizide ER 5 mg tablet, extended release 24 hr x 30 Da; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 6 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; patient participated in Physical Therapy over a year ago and the Patient has/is encouraged to continue daily gentle exercises for his low back/legs taught by physical therapy as tolerated. (If pain worsens patient to decrease and rest until pain subsides; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Known or Suspected Infection or abscess; There is no laboratory or x-ray evidence of osteomyelitis; There is not laboratory or x-ray evidence of meningitis.; There is not laboratory or x-ray evidence of an infected disc, septic arthritis, or "discitis"; There is not laboratory or x-ray evidence of a paraspinal abscess.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; ; There has been treatment or conservative therapy.; low back pain ;neck pain ;spinal enthesopathy multiple sites in spine; Medications ;Home exercise program; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; 4/29/2021; There has been treatment or conservative therapy.; Back pain and numbness; medication/ routine adjustment; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Enter answer here - or Type In Unknown If No Info Given. Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	findings from the studies will be incorporated into the decision process in formulating a treatment plan for the patient; 2020; There has been treatment or conservative therapy.; Neck and Lower back pain; medication, injections, and physical therapy; This study is being ordered for Other	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Abnormal Reflexes	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is a Medicare member.; The patient has Focal upper extremity weakness	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	8	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2001; There has been treatment or conservative therapy.; Chronic low back pain, significant leg length discrepancy (4 inches lost from injury as a child), ataxic gait, and radiculopathy.; Physical therapy, NSAIDs, analgesics, activity modification, HEP, shoe lift, and pain management injections.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	; 4/29/2021; There has been treatment or conservative therapy.; Back pain and numbness; medication/ routine adjustment; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Enter answer here - or Type In Unknown If No Info Given. Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given This study is being ordered for Other	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Findings from this study will be incorporated, in conjunction with objective findings, into the decision process in formulating a treatment plan for this patient.; 03/17/2022; There has been treatment or conservative therapy.; Neck pain, mid back pain, lower back pain.; rest, activity modification, home exercise program, and current;medications.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	N/A RECORDS ATTACHED.; 15 YEARS AGO; There has been treatment or conservative therapy.; MID TO LOW BACK PAIN THAT CAUSES RADIATION TO BILATERAL THIGHS. STIFFNESS.; ANTI-INFLAMMATORIES ;HOME EXERCISES;ROUTINE/DAILY LIFE CHANGES; This study is being ordered for Other	1	Apr-2022	Jun-2022

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; Patient complaint.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with an Epidural.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Known Tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2001; There has been treatment or conservative therapy.; Chronic low back pain, significant leg length discrepancy (4 inches lost from injury as a child), ataxic gait, and radiculopathy.; Physical therapy, NSAIDs, analgesics, activity modification, HEP, shoe lift, and pain management injections.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	UNKNOWN; MORE THAN 5 YEARS AGO.; There has been treatment or conservative therapy.; ACHING, BURNING, TINGLING, PAIN.; PATIENT HAS DONE HOME EXERCISES FOR 6 WEEKS. PATIENT ALSO HAS PAIN MEDICATION THAT HELPS THE PAIN TEMPORARILY.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; ; There has been treatment or conservative therapy.; low back pain ;neck pain ;spinal enthesopathy multiple sites in spine; Medications ;Home exercise program; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	findings from the studies will be incorporated into the decision process in formulating a treatment plan for the patient; 2020; There has been treatment or conservative therapy.; Neck and Lower back pain; medication, injections, and physical therapy; This study is being ordered for Other	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Findings from this study will be incorporated, in conjunction with objective findings, into the decision process in formulating a treatment plan for this patient.; 03/17/2022; There has been treatment or conservative therapy.; Neck pain, mid back pain, lower back pain.; rest, activity modification, home exercise program, and current medications.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	N/A RECORDS ATTACHED.; 15 YEARS AGO; There has been treatment or conservative therapy.; MID TO LOW BACK PAIN THAT CAUSES RADIATION TO BILATERAL THIGHS. STIFFNESS.; ANTI-INFLAMMATORIES ;HOME EXERCISES;ROUTINE/DAILY LIFE CHANGES; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected infection or abscess	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	35	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	21	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	13	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Dermatomal sensory changes on physical examination; This procedure is NOT being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Focal extremity weakness; This procedure is NOT being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	UNKNOWN; MORE THAN 5 YEARS AGO.; There has been treatment or conservative therapy.; ACHING, BURNING, TINGLING, PAIN.; PATIENT HAS DONE HOME EXERCISES FOR 6 WEEKS. PATIENT ALSO HAS PAIN MEDICATION THAT HELPS THE PAIN TEMPORARILY.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)		PATIENT COMPLETED PHYSICAL THERAPY ;PATIENT HAS TRIED HOME THERAPY AND OVER THE COUNTER NSAIDS AND CURRENT PAIN REGIMEN. PAIN WORSENS WITH PHYSICAL ACTIVITY; This is a request for a Pelvis MRI.; The study is being ordered for pelvic trauma or injury.; This is an evaluation of the sacrum.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a preoperative or recent postoperative evaluation.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material		This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; It is not known if there is weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Patient complaint along with numbness and tingling.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; 01/01/2022; There has been treatment or conservative therapy.; Neck and arm pain ;Back pain; pain medication ;lifestyle modification ;Therapy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Back: left lower back, right lower back;Neck: left lateral, right lateral; This study is being ordered for Trauma / Injury; There are neurological deficits on physical exam; It is unknown if the patient is demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are NO abnormal reflexes on exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	CERVICAL RFA C4-5, C5-6, C5-6 8/23/21 WITH 80% RELIEF;LUMBAR RFA L3-4, L4-5, L5-S1 6/9/21 WITH 80% RELIEF; 07/01/2021; There has been treatment or conservative therapy.; CERVICAL SPONDYLOSIS AND LUMBAR SPONDYLOSIS; PHYSICAL THERAPY, MEDICATIONS, CT EXAMS; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	History & physical are concerning for cervical radiculopathy and lumbar radiculopathy.;Physical Exam ;Constitutional: She is oriented to person, place, and time. She is cooperative. ;Pleasant older woman with chronic neck and back;She is sitting ; 1 to 5 years ago; There has been treatment or conservative therapy.; Chronic neck & arm pain. The patient presents with complaints of right hand, neck and left hand pain. The pain is described as constantly and aching, numbness and tingling.;Associated symptoms include neck pain, neck stiffness, back pain, numbness, sl; Medications- Gabapentin-not effective, Lyrica taken at this time, patient also has had NSAIDs and Muscle relaxants.;Cervical Interlaminar Epidural Steroid Injection-no relief given.;Patient has had physical therapy for her neck, back, and shoulder pai; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; ; There has been treatment or conservative therapy.; uncontrolled pain; Medication and physical therapy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; unknown; There has been treatment or conservative therapy.; Uncontrolled pain in lower back and legs, neck pain, not controlled w/ current modifications and medication.; activity modification, home exercises, medication, etc; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	MRI of spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; unknown; There has been treatment or conservative therapy.; Mid Back Pain (thoracic), Neck Pain and Lower Back Pain, Bilateral Shoulder Pain, Chronic Pain.; activity modification, home exercise program and medication; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Pre therapeutic pain injection; Unknown; There has been treatment or conservative therapy.; Pain in-between shoulder blades and left lower back that radiates into the left leg; Home exercise program, chiropractic treatments and medications; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	SEE ATTACHMENTS; 7 YEARS AGO; There has been treatment or conservative therapy.; Radiculopathy, cervical region;Radiculopathy, lumbar regio; MEDICATION PHYSICAL THERAPY; This study is being ordered for Congenital Anomaly	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatoma sensory changes on physical examination	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The patient has a new onset or changing radiculitis / radiculopathy; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is a Medicare member.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	6	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	8	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; Unknown; There has been treatment or conservative therapy.; Low back pain, neck pain, multiple joint pain; PT has had Physical Therapy, medication; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; MRI of lumbar spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	MRI of spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; unknown; There has been treatment or conservative therapy.; Mid Back Pain (thoracic), Neck Pain and Lower Back Pain, Bilateral Shoulder Pain, Chronic Pain.; activity modification, home exercise program and medication; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	1	Apr-Jun 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; It is unknown if there is recent evidence of a thoracic spine fracture.; It is not known if there is weakness or reflex abnormality.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is reflex abnormality.; 10/8	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; It is not known if the physician has directed conservative treatment for the past 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; 01/01/2022; There has been treatment or conservative therapy.; Neck and arm pain ;Back pain; pain medication ;lifestyle modification ;Therapy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; MRI of lumbar spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Back pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/1/2022; There has been treatment or conservative therapy.; coccygeal pain, lumbago, low back pain, medication management, physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Back: left lower back, right lower back;Neck: left lateral, right lateral; This study is being ordered for Trauma / Injury; There are neurological deficits on physical exam; It is unknown if the patient is demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are NO abnormal reflexes on exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	CERVICAL RFA C4-5, C5-6, C5-6 8/23/21 WITH 80% RELIEF;LUMBAR RFA L3-4, L4-5, L5-S1 6/9/21 WITH 80% RELIEF; 07/01/2021; There has been treatment or conservative therapy.; CERVICAL SPONDYLOSIS AND LUMBAR SPONDYLOSIS; PHYSICAL THERAPY, MEDICATIONS, CT EXAMS; This study is being ordered for Other	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	History & physical are concerning for cervical radiculopathy and lumbar radiculopathy.;;Physical Exam ;Constitutional: She is oriented to person, place, and time. She is cooperative. ;Pleasant older woman with chronic neck and back;She is sitting ; 1 to 5 years ago; There has been treatment or conservative therapy.; Chronic neck & arm pain. The patient presents with complaints of right hand, neck and left hand pain. The pain is described as constantly and aching, numbness and tingling.;Associated symptoms include neck pain, neck stiffness, back pain, numbness, sl; Medications- Gabapentin-not effective, Lyrica taken at this time, patient also has had NSAIDs and Muscle relaxants;;Cervical Interlaminar Epidural Steroid Injection-no relief given;;Patient has had physical therapy for her neck, back, and shoulder pai; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; ; There has been treatment or conservative therapy.; uncontrolled pain; Medication and physical therapy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; unknown; There has been treatment or conservative therapy.; Uncontrolled pain in lower back and legs, neck pain, not controlled w/ current modifications and medication.; activity modification, home exercises, medication, etc; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Pre therapeutic pain injection; Unknown; There has been treatment or conservative therapy.; Pain in-between shoulder blades and left lower back that radiates into the left leg; Home exercise program, chiropractic treatments and medications; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	SEE ATTACHMENTS; 7 YEARS AGO; There has been treatment or conservative therapy.; Radiculopathy, cervical region;Radiculopathy, lumbar regio; MEDICATION PHYSICAL THERAPY; This study is being ordered for Congenital Anomaly	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; Something other than listed has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 26 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	Apr-Jun 8 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; Unknown; There has been treatment or conservative therapy.; Low back pain, neck pain, multiple joint pain; PT has had Physical Therapy, medication; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Back pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/1/2022; There has been treatment or conservative therapy.; coccygeal pain, lumbago, low back pain; medication management, physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is not a history of upper extremity trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Baker's cyst (swelling in the back of the knee) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Anesthesiology	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)		This is a request for a Neck MR Angiography.; The patient had an ultrasound (doppler) of the neck or carotid arteries.; The ultrasound showed stenosis (narrowing) of the artery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	71250 Computed tomography, thorax; without contrast material		Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	71250 Computed tomography, thorax; without contrast material		Pre-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Pt scheduled for a mitral valve replacement. Need to eval aorta TODAY; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a pre-operative evaluation.; This surgery is scheduled/planned.; A catheter angiogram has not been performed within the last month.; Yes, this is a request for a Chest CT Angiography.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a vascular disease.; The requested studies are being ordered for known or suspected aneurysms and are being ordered by a surgeon or by the attending physician on behalf of a surgeon.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is vascular disease.; There is known or suspicion of an abdominal aortic aneurysm.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done.; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient has history of CAD with recurrent anginal symptoms. He does admit to intermittent anginal symptoms he describes as a burning sensation on the right side of his chest with exertion. If he stops his activity the symptoms subside. He states if he con; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; It is unknown if Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. The study is requested for evaluation of the heart prior to non cardiac surgery.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	2 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's speciality is Cardiac Surgery; This study is being ordered for evaluation related to chemotherapy (initial evaluation or follow-up).	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's speciality is Cardiac Surgery; This study is being ordered for evaluation related to chemotherapy (initial evaluation or follow-up).	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an evaluation of new or changing symptoms of valve disease.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for evaluation of change of clinical status.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of a recent myocardial infarction (heart attack).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; The last Transthoracic Echocardiogram was more than 6 months ago.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Approval	93350 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;		This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; This case was created via RadMD.; Agree; The ordering MDs speciality is Cardiac Surgery; Ambulates using assistive device such as crutches, cane, walker, or wheelchair	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	see clinicals; This study is being ordered for Vascular Disease.; 02/2021; There has been treatment or conservative therapy.; Patient has shortness of breast, delayed healing wound on his leg.; Patient has been on eliquis and plavix in the past. Right femoral-popliteal bypass graft with;popliteal artery endarterectomy and patch angioplasty.; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Continued uncontrolled HTN (I10); This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Disapproval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	see clinicals; This study is being ordered for Vascular Disease.; 02/2021; There has been treatment or conservative therapy.; Patient has shortness of breath, delayed healing wound on his leg.; Patient has been on eliquis and plavix in the past. Right femoral-popliteal bypass graft with;popliteal artery endarterectomy and patch angioplasty.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiac Surgery	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		Hypertension, Subclavian steal syndrome, left, by occlusion of ostium of left subclavian by carotid to subclavian bypass 1/12/2015, hx of myocardial infarction in 2014, 10/15/20 coronary CTA most likely LVH and what appeared to be a significant obstructive; This study is being ordered for Vascular Disease.; 10/23/2014; There has been treatment or conservative therapy.; Chest tightness, elevated blood pressure, occasional dizziness.; Graft Descending thoracic aorta endovascular repair for type B dissection with stent 10/23/2014.; Coreg 25 mg twice daily; losartan 25 mg daily; nifedipine 90 mg daily; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		atenosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; occlusion and stenosis; There has not been any treatment or conservative therapy.; stenosis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		medication; This study is being ordered for Vascular Disease.; Occlusion and stenosis; There has been treatment or conservative therapy.; medication; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		n/a; This study is being ordered for Vascular Disease.; 2020; It is not known if there has been any treatment or conservative therapy.; Dizziness, gait disturbance; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		suspected cardiac of vascular cause, patient is a every day smoker with STRONG family history of heart disease; This study is being ordered for Vascular Disease.; approximately 6 months ago would put it at November 2021; There has been treatment or conservative therapy.; Positive for bilateral numbness in arms, decreased pulses in both arms more on left than right, chest pain & recurrent dizziness; patient has been monitoring blood pressure, taking medications as prescribed; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing		atenosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; occlusion and stenosis; There has not been any treatment or conservative therapy.; stenosis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	medication; This study is being ordered for Vascular Disease.; Occlusion and stenosis; There has been treatment or conservative therapy.; medication; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	n/a; This study is being ordered for Vascular Disease.; 2020; It is not known if there has been any treatment or conservative therapy.; Dizziness, gait disturbance; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	suspected cardiac of vascular cause, patient is a every day smoker with STRONG family history of heart disease; This study is being ordered for Vascular Disease.; approximately 6 months ago would put it at November 2021; There has been treatment or conservative therapy.; Positive for bilateral numbness in arms, decreased pulses in both arms more on left than right, chest pain & recurrent dizziness; patient has been monitoring blood pressure, taking medications as prescribed; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the Neck.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure. 'None of the above' describes the reason for this request.; This study is being requested for 'none of the above'; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is NOT a smoker nor do they have a history of smoking.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; An abnormal finding on physical examination led to the suspicion of infection.; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	Cholangiocarcinoma of biliary tract; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250 Computed tomography, thorax; without contrast material	Coughing up blood (hemoptysis) describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250	Computed tomography, thorax; without contrast material	Hypertension, Subclavian steal syndrome, left, by occlusion of ostium of left subclavian by carotid to subclavian bypass 1/12/2015, hx of myocardial infarction in 2014, 10/15/20 coronary CTA most likely LVH and what appeared to be a significant obstructive; This study is being ordered for Vascular Disease.; 10/23/2014; There has been treatment or conservative therapy.; Chest tightness, elevated blood pressure, occasional dizziness.; Graft Descending thoracic aorta endovascular repair for type B dissection with stent 10/23/2014.; Coreg 25 mg twice daily; losartan 25 mg daily; nifedipine 90 mg daily; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250	Computed tomography, thorax; without contrast material	Post-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250	Computed tomography, thorax; without contrast material	Pre-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71250	Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT.; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days And cough; This study is being ordered for Vascular Disease.; 04/26/2022; There has not been any treatment or conservative therapy.; Shortness of breath and weakness.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a Follow-up to a previous angiogram or MR angiogram.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; It is not known whether there are signs or symptoms indicative of a progressive vascular stenosis.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a Follow-up to a previous angiogram or MR angiogram.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; There are no signs or symptoms of a progressive vascular stenosis.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a pre-operative evaluation.; This surgery is not scheduled/ planned.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a pre-operative evaluation.; This surgery is scheduled/planned.; A catheter angiogram has not been performed within the last month.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	4/13/2022 12:20:59 PMNOTEPeer-to-Peer Discussion held. Case decision discussed with and understood by Dr. Kumar. Synopsis of discussion: Originally did not want CTA b/c of Cr 1.2 but Cr is not very high. asked if they could just bolus fluids or somethin; It is not known whether this study is requested to evaluate suspected pulmonary embolus.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	aortic aneurysm; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Enter answer here pre-procedure electrophysiology ablation- or Type In Unknown if No Info Given.; It is not known whether this study is requested to evaluate suspected pulmonary embolus.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Evaluation of thoracic aortic aneurysm 6 months post heart surgery; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a post-operative evaluation.; It is not known whether there is physical evidence of re-bleed or re-stenosis.; There is no physical evidence of an infection or other complication.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Need to eval known aneurysm; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Patient c/o blood pressure is elevated in 140s in the AM but after taking it in the afternoon, it is within normal limits. 11/24/2021 Aneurysmal ascending aorta, measuring 4.3cm in diameter; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a post-operative evaluation.; There is no physical evidence of re-bleed or re-stenosis.; There is no physical evidence of an infection or other complication.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	patient has Atrial fibrillation by electrocardiogram, acute non-ST segment myocardial infarction, Chronic systolic (congestive) heart failure and COPD; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known or Suspected Congenital Abnormality.; The abnormality is of a cardiac nature.; There is a known or suspected coarctation of the aorta.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Patient has known thoracic aortic aneurism. Procedure is follow-up to see if there is any change.; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Preop examination; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Benign essential HTN;Dyspnea on exertion;Aortic valve stenosis, etiology of cardiac valve disease unspecified;Preop examination; There has been treatment or conservative therapy.; worsening shortness of breath. He also states that he "wears out real fast". He is considering a valve replacement.; DES to LAD;Added plavix;perclose; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	pt has a thoracic aortic aneurysm. Last time it was evaluated was in 2018 by CTA, it was 4cm at that time. pt also has uncontrolled hypertension.; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Pt here for chest pain and chest pressure. He has a thoracic aortic aneurysm; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	The ordering MDs specialty is Cardiology; The patient is scheduled for a TAVR (Transcatheter Aortic Valve Replacement) procedure within the next 6 weeks; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination; The patient has NOT had an Abdomen CTA, Chest CTA and or Pelvis CTA in the last 6 months	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	The patient has reported chronic dyspnea as well as intermittent palpitations. He has no chest pains but reports severe intermittent claudication since he had aortic dissection in December.; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a post-operative evaluation.; It is not known whether there is physical evidence of re-bleed or re-stenosis.; There is no physical evidence of an infection or other complication.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Inflammatory / Infectious Disease; The ordering MDs specialty is Cardiology; The patient is NOT scheduled for a TAVR (Transcatheter Aortic Valve Replacement) procedure within the next 6 weeks or it is unknown; The member has a known Thoracic and/or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known or Suspected Congenital Abnormality.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a Follow-up to a previous angiogram or MR angiogram.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; There are signs or symptoms indicative of a progressive vascular stenosis.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Suspected Vascular Disease.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; This is not an evaluation for thoracic outlet syndrome.; There are signs or symptoms indicative of vascular insufficiency to the neck or arms.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 32 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	trying to rule out pulmonary embolism;; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/02/2022 near syncope episode; It is not known if there has been any treatment or conservative therapy.; patient has SOB, chest pain, did have covid 1/2022; trying to rule out PE.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	UNKNOWN; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71555 Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	CARRIER OF HIGH RISK CANCER GENE MUTATION, COARCTATION OF AORTA, AND CONGENITAL MALFORMATION OF GREAT ARTERIES; This study is being ordered for Congenital Anomaly.; UNKNOWN; There has not been any treatment or conservative therapy.; CONGENITAL MALFORMATION OF GREAT ARTERIES, ASSESS AORTIC ARCH-DIAGNOSED WITH AORTIC COARCTATION AT NIH, ALSO ASSESS BRANCH PULMONARY ARTERY FOR POTENTIAL LEFT DISTAL BRANCH PA STENOSIS(MURMUR OVER THE LEFT UPPER PARASTERNAL AREA), CARRIER OF HIGH RISK CAN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71555 Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	Congenital aortic valve stenosis;Congenital pulmonary valve stenosis;Congenital aortic valve insufficiency;Nonrheumatic pulmonary valve insufficiency;S/P transcatheter balloon dilatation of pulmonary valve;Bicuspid aortic valve;;Kaley also has inc; This study is being ordered for Congenital Anomaly.; 08/08/2000; There has been treatment or conservative therapy.; ; S/P transcatheter balloon dilatation of pulmonary valve. 06/15/2001;Pr percut pulmonary valvuloplasty 2001. SBE prophylaxis at times of increased risk. No participation in sports or activities which require maximum or sustained effort.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71555 Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	CONGENITAL HEART DISEASE KNOWN OR SUSPECTED VALVULAR HEART DISEASE, FOLLOW UP TO QUANTIFY AORTIC REGURGITATION, BIOPROSTHETIC PULMONARY VALVE, RV AND LV VOLUME AND FUNCTION, BRANCH PULMONARY ARTIERIES, AORTIC DIMENSIONS.; This study is being ordered for Congenital Anomaly.; 08/11/1990; It is not known if there has been any treatment or conservative therapy.; CONGENITAL STENOSIS OF AORTIC VALVE; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	71555 Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	patient has aortic dissection thoracic, dilated aortic root, abnormal CT of chest, Thoracic aortic aneurysm.; This is a request for an MR Angiogram of the chest or thorax	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	72125 Computed tomography, cervical spine; without contrast material	There are documented clinical findings of immune system suppression.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; None of the options listed is the reason for the study.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the lower extremity.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI; The study is being ordered for a pre op.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74150 Computed tomography, abdomen; without contrast material	Cholangiocarcinoma of biliary tract; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a vascular disease.; The requested studies are being ordered for known or suspected aneurysms and are being ordered by a surgeon or by the attending physician on behalf of a surgeon.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Preop examination; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Benign essential HTN;Dyspnea on exertion;Aortic valve stenosis, etiology of cardiac valve disease unspecified;Preop examination; There has been treatment or conservative therapy.; worsening shortness of breath. He also states that he "wears out real fast". He is considering a valve replacement.; DES to LAD;Added plavix;perclose; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	The ordering MDs specialty is Cardiology; The patient is scheduled for a TAVR (Transcatheter Aortic Valve Replacement) procedure within the next 6 weeks; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination; The patient has NOT had an Abdomen CTA, Chest CTA and or Pelvis CTA in the last 6 months	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	18 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Inflammatory / Infectious Disease; The ordering MDs specialty is Cardiology; The patient is NOT scheduled for a TAVR (Transcatheter Aortic Valve Replacement) procedure within the next 6 weeks or it is unknown; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; This study is being ordered for Vascular Disease.; 70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; There has been treatment or conservative therapy.; 70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; 70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdomen.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Hypertension, Subclavian steal syndrome, left, by occlusion of ostium of left subclavian by carotid to subclavian bypass 1/12/2015, hx of myocardial infarction in 2014, 10/15/20 coronary CTA most likely LVH and what appeared to be a significant obstructiv; This study is being ordered for Vascular Disease.; 10/23/2014; There has been treatment or conservative therapy.; Chest tightness, elevated blood pressure, occasional dizziness.; Graft Descending thoracic aorta endovascular repair for type B dissection with stent 10/23/2014.;Coreg 25 mg twice daily;losartan 25 mg daily;nifedipine 90 mg daily; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Consult/Testing for TAVR procedure.; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	74185 Magnetic resonance angiography, abdomen, with or without contrast material(s)	This is a request for a MR Angiogram of the abdomen.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	CARRIER OF HIGH RISK CANCER GENE MUTATION, COARCTATION OF AORTA, AND CONGENITAL MALFORMATION OF GREAT ARTERIES; This study is being ordered for Congenital Anomaly.; UNKNOWN; There has not been any treatment or conservative therapy.; CONGENITAL MALFORMATION OF GREAT ARTERIES, ASSESS AORTIC ARCH-DIAGNOSED WITH AORTIC COARCTATION AT NIH, ALSO ASSESS BRANCH PULMONARY ARTERY FOR POTENTIAL LEFT DISTAL BRANCH PA STENOSIS(MURMUR OVER THE LEFT UPPER PARASTERNAL AREA), CARRIER OF HIGH RISK CAN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	Congenital aortic valve stenosis;Congenital pulmonary valve stenosis;Congenital aortic valve insufficiency;Nonrheumatic pulmonary valve insufficiency;S/P transcatheter balloon dilatation of pulmonary valve;Bicuspid aortic valve;;Kaley also has inc; This study is being ordered for Congenital Anomaly.; 08/08/2000; There has been treatment or conservative therapy. ; ; S/P transcatheter balloon dilatation of pulmonary valve. 06/15/2001;Pr percut pulmonary valvuloplasty 2001. SBE prophylaxis at times of increased risk. No participation in sports or activities which require maximum or sustained effort.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	CONGENITAL HEART DISEASE KNOWN OR SUSPECTED VALVULAR HEART DISEASE, FOLLOW UP TO QUANTIFY AORTIC REGURGITATION, BIOPROSTHETIC PULMONARY VALVE, RV AND LV VOLUME AND FUNCTION, BRANCH PULMONARY ARTIERIES, AORTIC DIMENSIONS.; This study is being ordered for Congenital Anomaly.; 08/11/1990; It is not known if there has been any treatment or conservative therapy.; CONGENITAL STENOSIS OF AORTIC VALVE; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	This is a request for a heart or cardiac MRI	6 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	This is a request for a heart or cardiac MRI	7 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	This is a request for a heart or cardiac MRI	8 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75572 Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	Preop examination; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Benign essential HTN;Dyspnea on exertion;Aortic valve stenosis, etiology of cardiac valve disease unspecified;Preop examination; There has been treatment or conservative therapy.; worsening shortness of breath. He also states that he "wears out real fast". He is considering a valve replacement.; DES to LAD;Added plavix;perclose; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75572 Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	This is a request for a Heart CT.	6 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75572 Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	This is a request for a Heart CT.	7 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75573 Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of left ventricular [LV] cardiac function, right ventricular [RV] structure and function and evaluation of vascular structures, if performed)	This is a request for Heart CT Congenital Studies.	2 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	; This is a request for CTA Coronary Arteries.; It is not known if other testing has been done.; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	; This is a request for CTA Coronary Arteries.; The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	53 y.o. Caucasian female is here today for follow up for coronary artery disease post MI, shortness of breath, chest pain, dyspnea on exertion, hypertension, hyper regurgitation, tricuspid regurgitation, smoker, strong family history of CAD. On 02/28/2022; This is a request for CTA Coronary Arteries.; The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	Assessments ; 1. Aortic stenosis - I35.0 (Primary) ;;2. Atrial fibrillation - I48.91 ;;3. Morbid obesity - E66.01 ;;4. Dyspnea - R06.00 ;;5. Hypertension - I10 ;;6. CAD (coronary artery disease) - I25.10; This is a request for CTA Coronary Arteries.; The patient has had Myocardial Perfusion Imaging including SPECT (single photon Emission Computerized Tomography) or Thallium Scan.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	Assessments:1. Premature ventricular contraction - I49.3 (Primary) ;2. Mitral regurgitation - I34.0 ;;Sinus Rhythm Low voltage in precordial leads. ABNORMAL; This is a request for CTA Coronary Arteries.; The patient had a recent CCTA to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	cp; This is a request for CTA Coronary Arteries.; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	Exertional chest discomfort. Myocardial Imaging showed no ischemia 6/2021; This is a request for CTA Coronary Arteries.; The patient has had Myocardial Perfusion Imaging including SPECT (single photon Emission Computerized Tomography) or Thallium Scan.; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	FINAL IMPRESSION: ;1. Positive bubble study. ;2. Normal LV function with an EF around 60%, mild left ventricular hypertrophy. ;3. Trivial A1.;4. Trivial TR.;5. Trivial P1.; This is a request for CTA Coronary Arteries.; The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	Left Heart Cath on 4/6/2022 showed multivessel CAD and a moderate to severely dilated ascending aorta. Dr. Starnes wants a CTA for further assessment of TAA to plan revascularization surgical vs PCI. ;80% mid LAD stenosis;50-75% mid left circumflex;30%; This is a request for CTA Coronary Arteries.; The patient had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; It is not known if there are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	Patient has ST-T changes, overweight and smokes, chest pain at Rest, Irregular heartbeat; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/14/22; There has been treatment or conservative therapy.; Hypertension chest pain, history of cardiac death; cardio, exercise and diet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	Patient with complaint of chest pain, shortness of breath, and uncontrolled hypertension. Patient had a nondiagnostic stress test 6/3/2022. Patient has complaint of being unable to do daily living activities and worsening fatigue. Patient is a known diabe; This is a request for CTA Coronary Arteries.; The patient has had a stress echocardiogram; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	Pre-procedural study for atrial fibrillation cardiac ablation.; This is a request for CTA Coronary Arteries.; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	The Patient has shortness of breath and chest PAIN; This is a request for CTA Coronary Arteries.; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done.; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done.; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 23 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; It is not known if the member has known or suspected coronary artery disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The study is requested for congestive heart failure.; The member does not have known or suspected coronary artery disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The study is requested for evaluation of the heart prior to non cardiac surgery.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The study is requested for known or suspected cardiac septal defect.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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)	This is a request for CTA Coronary Arteries.; The study is requested for known or suspected valve disorders.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	44	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	45	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	57 yo wmn, she went to a local ER with right arm and right leg numbness and pain, she was told no ;MRI head was done as well , she is s/p neck surgery twice. ; Also states that she is still having edema to right leg only to the point sometimes th; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	Assessment: ;;1. Angina, class II - I20.9 (Primary) ;2. Type 2 diabetes mellitus without complication, without long-term current use of insulin - E11.9 ;3. Essential hypertension - I10 ; We will risk stratify with a PET/CT and ECHO.; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	Assessments ;1. CAD in native artery - I25.10 (Primary) ;;2. Primary hypertension - I10 ;;3. Angina, class II - I20.9; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	Enter answer here - or Type In Unknown If No Info Given. > Chest pain and hypertension.; This study is being ordered for Vascular Disease.; Enter date of initial onset here - or Type In Unknown If No Info Given >; 05/11/2018; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given >; Diabetes, chest pains, and Bradycardia.; Describe treatment / conservative therapy here - or Type In Unknown If No Info Given >; Medication, past echo, she's been in the hospital several times.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	History of Present Illness ;HPI: ; 83 yo male with TIA/vascular dementia presenting with DOE and epigastric pain.; For the past few years c/o DOE. Now also c/o left sided chest pain. Sharp. Can be worse with exertion. Can last for hours.; This is a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.; Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	MORBIDLY OBESE, BMI 56.16, DM, SOB, DOE, HX PVD; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	Mrs. Grant is here today for a cardiac evaluation. She went to PCP for bradycardia. She had an abnormal EKG with bradycardia. She denies any syncope. She denies chest pain or shortness of breath.; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	Patient has CAD, Afib, shortness of breath, hypertension, status post coronary artery stent placement, diabetes, and hyperlipidemia; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	patient has peripheral vascular disease with claudication and coronary artery disease.; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	This is a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.; This case was created via RadMD.; Agree; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	This is a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.; This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed More than 1 year ago; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	This is a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.; This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 19 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	This is a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	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	This study is being ordered to identify a myocardial perfusion defect.; This patient has NOT had a SPECT scan within the past eight (8) weeks.; Yes, the patient has symptoms including chest tightness, angina and/or shortness of breath on exertion.; The patient has a body Mass List score index equal to or above 40.; This is a request for a Heart PET Scan with CT for Attenuation.	11 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)		1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is less than 20	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is not know	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are not new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; Shortness of Breath and Chest discomfort. She has occasional palpitations. Syncope Episode with the last episode of Chest Pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This study is being ordered for Vascular Disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This study is being ordered for Vascular Disease.; FEB 9, 2022, SAW PCP, CA SCORE ABN, CHEST PAIN SENT TO CARDIOLOGIST.; It is not known if there has been any treatment or conservative therapy.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This study is being ordered for Vascular Disease.; Susan Heiler is a 72 year old female, comes to clinic today to establish care after recently moving from florida to NWA. She is not having any symptoms at this time, just gets tired easily. She was followed by Dr Fontanet at advent health in florida 813-9; There has not been any treatment or conservative therapy.; She describes fatigue, intermittent random jaw pain. Nonexertional. She will also have shortness of breath with moderate exertion. Nothing progressive at this time denies PND orthopnea or syncope. Certainly cannot exclude anginal equivalent; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	1. Coronary artery disease, status post PCI to the RCA in February 2021. The patient has completed a year of dual-antiplatelet therapy with Brilinta. We will transition the patient to Xarelto 2.5 mg twice a day with aspirin. The patient is having chest pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	1. Recurrent exertional palpitations shortness of breath for several months. Prior cardiac testing.;2. Elevated blood pressure without diagnosed hypertension: Blood pressure mildly elevated today. She is not on any medications.;3. Obesity: Moderate; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	1. Symptomatic palpitations.;2. Chest pain.;3. Diabetes mellitus.;4. Hyperlipidemia.;5. Fairly recent knee surgery, unable to walk on a regular treadmill.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	42-year-old white female who presents with upper mid precordial and neck, sensation of pressure/squeezing, associated with dyspnea, moderate to severe in intensity, lasting less than 5 minutes, spontaneous resolution. Symptoms are randomly occurring with ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	49 y.o. Caucasian male is here today for follow up for CAD, hypertension, cardiac murmur, tricuspid regurgitation, and mixed hyperlipidemia. The patient reports shortness of breath with activity and at rest. At night he is sleeping on several pillows. ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	60 y.o. Caucasian female is here today accompanied by her husband for follow up for supraventricular dysrhythmia, ventricular dysrhythmia, essential hypertension, pulmonary hypertension, nonrheumatic tricuspid insufficiency, stage III chronic kidney disease; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	63-year-old white female who presents with recurrent episodes of mid precordial sharp chest pain radiating into her back, associated with dyspnea, moderate, frequently severe in intensity, lasting less than 5 minutes, spontaneous resolution. Symptoms are ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	A sublingual nitroglycerin given and he stated that provided some relief then the pain came back. Although no acute changes on the EKG and patient is hemodynamically stable, due to the fact that the patient excruciating pain, has feeling of doom, dizziness; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Abnormal stress EKG, with evidence of inducible myocardial ischemia in the inferior and lateral leads at 62% of the maximal predicted heart rate. Doctor wants to do an MPI for pt.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Atypical chest pain, Denies SOB. Has some palpitations with walking. DOE as well. History of CAD s/p CABG. Unable to walk on TM due to knee pain.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	CAD with bypass x3 in 2014;;chest pain/squeezing occurs at rest and exertion sometimes radiates into left arm;;hypertension;hyperlipidemia;smoker x45yr 1ppd;strong family hx CAD;hx AAA repair; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	CAD with PCI to mLAD;hypertension;hyperlipidemia;chest pain;nicotine dependence;presence of pacemaker;R/L SFA angioplasty; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	CAD with stents chest pains;Anterior NSTEMI 9/2021;BMI 32; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	CAD, dilated cardiomyopathy, chronic systolic heart failure, hypertension, palpitations, BMI 33; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Cardiolite imaging study to assess for ongoing ischemic burden;echocardiogram to assess the status of her mitral valve regurgitation and LV function;Sublingual nitroglycerin will be called to her local pharmacy; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Patient seen in clinic on 3/28/22. Symptoms began 03/21/2022.; There has been treatment or conservative therapy.; 1 week history of intermittent angina at rest with exertion lasting minutes in duration with nausea. She is not taking any nitrates. Last echo showed mild mitral regurgitation with normal ejection fraction.; sublingual Nitroglycerin 0.4mg 1 tablet as needed for chest pain every 5 minutes up to 3 doses. called in to local pharmacy.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	chest pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Chest pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	chest pain; This study is being ordered for Vascular Disease.; unknown; There has been treatment or conservative therapy.; shortness of breath .murmur; medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	CHEST PAIN;DIABETES;HYPERTENSION;CHRONIC RENAL INSUFFICIENCY; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	chest pain;dyspnea;chf; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Chest pain/Shortness of breath; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Due to his PVD, he has wounds on his legs and leg pain. He is unable to walk on a treadmill.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	EKG from PCP indicated NSR with no acute changes. Hx of MI with cardiac arrest in 1999. Intermittent episodes of Diaphoresis, palps, and CP. Given hx will repeat outpatient stress test. Unable to walk on treadmill due to "bad" knee.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is not know	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &t;5/4/2022; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &t; chest, arm pain, shortness of breath and palpitations; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/18/22; There has been treatment or conservative therapy.; shortness of breath, chest pain; EKG, abnormal; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 10/2020; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given Medication.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. &t; No information given.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &t; 4/21/2021; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &t; Shortness of breath, heaviness in the chest.; Describe treatment / conservative therapy here - or Type In Unknown If No Info Given &t; Stent placement.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Establish care. Has a significant family history of CAD, hyperlipidemia, hypertension and diabetes. Complains of precordial pain. Unable to walk on TM due to ortho issues; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	EXERCISE STRESS TEST; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	He presents with chest pain and shortness of breath. He has a history of drug use. His EKG was abnormal. He is not able to do a treadmill stress test due to back problems.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	History of stent and cath surgery. patient is diabetic. patient unable to walk on tread mill; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	History of STMI Stent last year; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	In light of ACE inhibitor induced cough, patient has been placed on my card is HCTZ 80/25 mg, 1 tablet p.o. daily. Blood pressure diary for two weeks. Patient has had occasional edema. After blood pressure readings described previously we will consider ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	In view of this patients history of CAD and coronary interventions, and the fact that he has exertional symptoms we will need to study him further via Cardio lite stress imaging and follow-up as those data suggest; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Known CAD and stents in heart.; This study is being ordered for Vascular Disease.; 05/2022; There has not been any treatment or conservative therapy.; Chest pain and shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Mr Stafford is 38 year old white male with a past medical history of Diabetes, Hypertension, family history of CAD, RA, and Hyperlipidemia who is here as a new patient for cardiac evaluation. Pt was recently seen in the ED on 04/14/22 where he states he w; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/14/2022; There has been treatment or conservative therapy.; CHEST PAIN; SHORTNESS OF BREATH; DIZZINESS; PALPITATIONS; EMERGENCY ROOM VISIT TREATED WITH MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Mr. Johnny Henley is a 61 year old Caucasian male with a chronic past medical history of ischemic cardiomyopathy s/p dual chamber AICD, CAD s/p 5V CABG and stent placement, hypertension, hyperlipidemia, diabetes, and obesity, here today for follow up. Pt ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; APRIL 2022; There has been treatment or conservative therapy.; SHARP, LEFT SIDED CHEST PAIN; NAUSEATED; HEADACHE; HEART BURN; WORSENING SHORTNESS OF BREATH WITH MINIMAL ACTIVITY; PT HAS A DUAL CHAMBER AICD S/P 5V CABG AND STENT PLACEMENT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Mr. McNutt is a 60 year old male with a PMH of bipolar disorder and COPD who is here today as a new pt. Pt states he has had worsening chest pain and shortness of breath with minimal activity and increased fatigue. He states that he can barely walk across; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; CHEST PAIN; SHORTNESS OF BREATH; DIZZINESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Mr. Shue is a 34 year old male with a PMH of PE 01/2022 s/p thrombectomy, DVT dx in 01/2022, family history of heart disease, hx of drug use, hx of Covid-19, tobacco use, and HTN who is here today as a new pt. Patient reports having episodes of sharp ches; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 01/2022; There has been treatment or conservative therapy.; SHORTNESS OF BREATH WITH EXERTION; CHEST PAIN; DIZZINESS; SYNCOPE;; MEDICALLY MANAGED; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Mr. Walker is a 59 year old African American male with a chronic past medical history of CAD, hypertension, hyperlipidemia, and obesity, here today for 6 month follow up. Patient reports having tightness to midsternal chest area when he wakes in the AM la; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; Patient reports having tightness to midsternal chest area when he wakes in the AM lasting for a few minutes. Patient has only exertional shortness of breath.; LHC: 01/02/2014 - Obstructive 1V involving the mid OM w/direct stenting of the OM1. LVEF 55%; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Ms. Robinson is a 42 year old AAF with a past medical history of hypertension, dyslipidemia, family history of heart disease, GERD, type II DM, depression, anxiety, and obesity, referred by Dr. Tim Simon for a cardiac evaluation due to recent chest pain.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Ms. Smithson is a very pleasant 63 year old s/p TAH lady (self-employed) with significant history for HTN, HLPD, and hypothyroidism, followed by Dr. Ali, referred for chest discomfort. She reports occasional chest discomfort/pressure which started around ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Ms. Wise is a 57-year-old patient of Dr. Mike Ford. I am asked to see her for evaluation of chest pain. She has a chronic chest pain syndrome. She had motor vehicle accident 3 years ago, and had a sternal fracture and multiple rib fractures. Since the; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	N/A; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; It is not known if there are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	NEEDED BEFORE PACEMAKER INSERTION; This study is being ordered for Vascular Disease.; 2 YRS AGO; There has been treatment or conservative therapy.; He comes to the clinic today for new patient evaluation at the request of Spiller, Ginger, APRN for onset afib. States sometimes he gets SOB when he rides his bicycle 3 times a week, but he thinks is due to be overweight. Family hx of HNT on his father w; He was recently at his PCP for a routine visit. He was found to be in afib with RVR. Xarelto and diltiazem was started. He reports he was completely unaware of the afib. TSH was normal.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	No Info Given.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	NO STRESS ECHO WITHIN 60 MILE RADIUS; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	NOTHING FURTHER; This study is being ordered for Vascular Disease.; 12/2021; There has been treatment or conservative therapy.; SHORTNESS OF BREATH; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	On this visit I spent 45 minutes providing care to this patient including reviewing all pertinent information pertaining this visit, prior medical problems, current medications, face to face consultation, followed by appropriate and detailed documentation; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	PAST MEDICAL HISTOR OF HYPERTENSION; DIABETES; PT STATED THAT HE WAS TOLD BY HIS PCP THAT HE HAD A HEART MURMUR; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; PROGRESSIVE SHORTNESS OF BREATH WITH MINIMAL EXERTION; CHEST PAIN AND CHEST TIGHTNESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	PAST MEDICAL HISTORY OF BREAST CANCER; HYPERTENSION; FAMILY HISTORY OF HEART DISEASE; NOT A CANDIDATE FOR TREADMILL STRESS TEST DUE TO JOINT PAIN; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; RIGHT SIDED CHEST PAIN; SHORTNESS OF BREATH; FATIGUE; LOWER EXT EDEMA; PALPITATIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient experiencing new onset of sob on exertion, with htn, hld and significant cardiac hx with father having heart transplant, mother with CAD and sever MR. He has had knee surgery and is unable to walk on treadmill, so will need a chemical study; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient had a treadmill stress test 08/13/2020 and experienced chest pain. She also had arthritis and walking difficulty; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	patient has chronic knee pain which limits her ability to get to the necessary speed for an treadmill test; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	patient has diabetes, is 57 years old, BMI of 32.59, family history of Coronary artery disease and ASCVD, chest pain and hypertension; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	patient has strong immediate family history of CAD, has hypertension, has bmi 35.4, LDL of 133.2, and has chest pain with increasing frequency that radiates to neck and left arm; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient is 53 y/o male for follow up for CAD and HTN. He had a hospital admit 2 weeks ago for dyspnea and states his ECHO was good but was unable to get a MPS because of no dye. He reports dyspnea with exertion and edema to RLE. He denies chest pain, palp; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient needing clearance for neck surgery with complaint for shortness of breath with a negative pulmonary function test. History of congestive heart failure. Currently has a LVEF 55% on echocardiogram. ECG shows sinus bradycardia with first degree AV bl; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient w hx of 20% RCA stenosis c/o chest discomfort with stress, radiating down left arm & shoulder, dyspnea on mod exertion, abnormal EKG; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient was approved for an RSE CPT code 93351. Patient is having dizziness, nausea, and fatigue. She says she can no longer do a treadmill due to weakness and dizziness. Patient still has complaint of chest pain.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient with a history of myocardial infarction with ST elevation August 2021. Patient has been complaint of chst pain, substernal and radicates across precordium and is brought on by stress and activity. Patien is unable to walk on a treadmill due to art; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient with c/o dyspnea on exertion, dizziness with palpitations, near syncope, and activity intolerance. Symptoms improve with rest. Diabetes, htn, dyslipidemia, family hx of CAD; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient with mild non-obstructive CAD c/o severe increase in SOB. Monitor revealing increased PVC burden up to 19%; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Plain Treadmill Stress test was abn.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	pre op; This study is being ordered for Vascular Disease.; heart failure; There has been treatment or conservative therapy.; heart failure, htn; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	pt c/o cp with exertion and associated nausea, increased dyspnea on exertion relieved w rest. Recurrent syncope. Abn EKG with anterior lead t-wave reversal. Pt attempted TMST in Feb 2022 but did not reach target hr and could only walk 3 min; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	PT had symptoms and EKG changes to suggest ischemia secondary to occlusive coronary arterial disease. They were limited by head ache. The patient had a hypertensive blood pressure response to exercise(218/104).; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	PT HAS ANGINA, MURMUR ON EXAM, ESSENTIAL HYPERTENSION, ABNORMAL EKG, AND HYPERLIPIDEMIA; This study is being ordered for Vascular Disease.; PT CAME IN FOR NEW PT APPT ON 3/29/22. NEW SYMPTOMS; There has not been any treatment or conservative therapy.; DYSPNEA ON EXERTION, MARKED EFFORT INTOLERANCE, SOME DIZZINESS AND LIGHTHEADEDNESS;PT HAS ABN EKG, MURMUR AND BRUIT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Pt has Atrial Fibrillation. Need to evaluate heart Function. Rule out Coronary Artery Disease. Pt can not walk on treadmill due to being 386 lbs.; This study is being ordered for Vascular Disease.; May 2022; There has been treatment or conservative therapy.; Chest Pain, Shortness of Breath, Fatigue, Palpitations, Edema, Atrial Fibrillation; Pt is on medications. Pt was recently in the hospital for chest pain. Dietary modifications suggested. Pt weight is 386; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Recent hospitalization with pulmonary infection. Found to have elevated troponin. Has episodes of chest pain and SOB. Unable to walk on TM, uses cane regularly.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is less than 20	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	recurrent chest pain (atypical) given her hx of NSTEMI will order lexiscan stress test to make sure her LAD/CX disease has not progressed; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	referred for evaluation of coronary artery calcification and chest discomfort. Today, she returns for follow-up, reports progressively worsening dyspnea on exertion over the past few months. She also has paroxysmal chest pains and has noticed a lot of L; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	She presents today for follow up. She reports continued chest pain. She has a chest tightness with no specific exacerbating or alleviating factors. Denies SOB, palpitation, dizziness, or syncope.;LHC 2018 with 30-40% lesion proximal LAD. will check lexis; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	The patient did NOT have a prior CABG; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block; The patient has NOT had a prior stent; The patient has documented ejection fraction on prior TTE (Transthoracic Echocardiogram) of less than 40%	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	THE PATIENT HAD A REGULAR TREADMILL STRESS TEST AND WAS UNABLE TO COMPLETE DUE TO SHORTNESS OF BREATH AND ANGINA.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	The patient has been referring chest pain, that began 2 months ago, precordial in location, sharp in character, with a severity that has increased from 3 out of 10 2 lately 10 out of 10, episodes lasting hours on and off, radiated to the left upper extrem; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is less than 20	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	THE PATIENTS ECHOCARDIOGRAM WAS GOOD BUT THE PATIENT COULD ONLY GO LESS THAN STAGE 1 BRUCE ON THE EXERCISE STRESS TEST. PATIENT COMPLAINED OF CHEST PAIN AND DIZZIENS. WE WILL ADMINISTER THE STRESSING AGENT LEXISCAN DUE TO PATIENT UNABLE TO WALK ON TMST.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a 44 year old female with known CAD and history of CABG. She is having SOB, fatigue and left arm pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); Don't know or Other than listed above best describes the reason for ordering this study	Apr-Jun 9 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed More than 6 months ago	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed More than 6 months ago	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; It is unknown if the symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; It is unknown if the symptoms are new or changing with new EKG changes or if the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; This case was created via RadMD.; Agree; The ordering MDs specialty is Cardiology; Ambulates using assistive device such as crutches, cane, walker, or wheelchair	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; This case was created via RadMD.; Agree; The ordering MDs specialty is Cardiology; The patient had a Recent surgery, within the last 3 months, involving a lower extremity, such as hip, knee replacement or repair	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a Body Mass Index (BMI) greater than 40	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known left bundle branch block as documented on an EKG and has been interpreted by a Cardiologist	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is Left Anterior Descending	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is Other than listed above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is Right Coronary Artery	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; This case was created via RadMD.; The patient has a history of Coronary Artery Bypass Surgery (CABG); The last Myocardial Perfusion Imaging procedure was performed greater than 12 months; Agree; The ordering MDs specialty is Cardiology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; This case was created via RadMD.; The patient has a permanent pacemaker or Automatic Implantable Cardioverter/Defibrillator (AICD); The last Myocardial Perfusion Imaging procedure was performed greater than 12 months; Agree; The ordering MDs specialty is Cardiology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months; Other cardiac stress testing was completed less than one year ago	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed More than 1 year ago; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Pre operative evaluation for non cardiac surgery requiring general anesthesia best describes the patients clinical presentation.; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	63	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	7	2022	2022	Apr-Jun







4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; Changing symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	7	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	43	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	44	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed More than 1 year ago; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed More than 1 year ago; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	10	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	THIS PATIENT WAS A NEW PATIENT TO OUR CLINIC, COMPLAINING OF CHEST PAIN AND SHORTNESS OF BREATH. THE PATIENT STATED THIS WAS THE SAME SYMPTOMS HE HAD EXPERIENCED BEFORE HIS LAST STENTING THREE YEARS AGO. THE PATIENT BLOOD PRESSURE IS NOT UNDER GOOD CONT; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; NOT LISTED; There has not been any treatment or conservative therapy.; EXERTIONAL SHORTNESS OF BREATH; HEART FLUTTER; SHOULDER PAIN; LOWER EXT EDEMA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This study is being ordered for Vascular Disease.; 6/17/2022; There has been treatment or conservative therapy.; chest pain, afib, fatigue and shortness of breath; started the patient on medications, Low dose Aspirin , Sotalol, Carvedilol; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This study is being ordered for Vascular Disease.; UNKNOWN; There has not been any treatment or conservative therapy.; CHEST PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	WEIGHT IS 241;Pertinent history includes: CAD, paroxysmal atrial fibrillation, anticoagulated with Eliquis, possible TIA May 2020, paroxysmal SVT, hypertension, sinus tachycardia, dyslipidemia, possible seizures, hyperthyroidism.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	will fax additional clinicals; This study is being ordered for Vascular Disease.; Unknown; There has been treatment or conservative therapy.; chest painshortness of breath; medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Suspected Cardiomyopathy/ Myocarditis.; The patient has not recently been diagnosed with and/or treated for congestive heart failure.; The patient is presenting new cardiac signs or symptoms.; The patient has not had a recent MI.; There are not documented clinical findings consistent with a valve disease.; There are documented clinical findings consistent with hypertension.; Ms. Marshall is a 56 year old AAF with a past medical history of hypertension, dyslipidemia, arthritis, legally blind, anxiety, GERD, depression, IDDM, COPD, PE on Eliquis, OA, and morbid obesity. I initially saw her in consult in January 2022 where she	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Suspected Cardiomyopathy/ Myocarditis.; The patient has recently been diagnosed with and/or treated for congestive heart failure.; The patient has not had a previous MUGA scan.; The patient is presenting new cardiac signs or symptoms.; The patient has not had a recent MI.; There are documented clinical findings consistent with a valve disease.;	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has NOT been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; Shortness of Breath and Chest discomfort. She has occasional palpitations. Syncopal Episode with the last episode of Chest Pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for Vascular Disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for Vascular Disease.; Enter date of initial onset here UNKNOWN; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for Vascular Disease.; FEB 9, 2022, SAW PCP, CA SCORE ABN, CHEST PAIN SENT TO CARDIOLOGIST.; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for Vascular Disease.; Susan Heiler is a 72 year old female, comes to clinic today to establish care after recently moving from florida to NWA. She is not having any symptoms at this time, just gets tired easily. She was followed by Dr Fontanet at advent health in florida 813-9; There has not been any treatment or conservative therapy.; She describes fatigue, intermittent random jaw pain. Nonexertional. She will also have shortness of breath with moderate exertion. Nothing progressive at this time denies PND orthopnea or syncope. Certainly cannot exclude anginal equivalent; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	And cough; This study is being ordered for Vascular Disease.; 04/26/2022; There has not been any treatment or conservative therapy.; Shortness of breath and weakness.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	ankle swelling; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2 months ago; There has not been any treatment or conservative therapy.; DVT, HLD, HTN, chest pains, palpitations, SOB, leg swelling, syncope; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	BECKER MUSCULAR DYSTROPHY, CONT. SURVEILLANCE OF KNOWN DIAGNOSIS; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has NOT been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Bicuspid Aortic Valve flow. LVH and function. Ascending aortic dilation.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; There has NOT been a change in clinical status since the last echocardiogram.; This request is NOT for initial evaluation of a murmur.; This is a request for follow up of a known murmur.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	CAD EVAL FOR CHEST PAIN, SHORTNESS OF BREATH; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; CHEST PAIN, SHORTNESS OF BREATH; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Cardiology Follow up. Routine Surveillance/monitoring. Congenital heart disease in the form of a large perimembranous ventricular septal defect with associated pulmonary artery branch stenosis; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	chest pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; chest pain; There has not been any treatment or conservative therapy.; chest pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	chest pain; This study is being ordered for Vascular Disease.; unknown; There has been treatment or conservative therapy.; shortness of breath ,murmur; medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Congenital Myasthenic syndrome; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	ekg also shows RSR in V1. also maternal mother with hx of arrhythmia; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here - or Type In Unknown If No Info Given.;Valvular disease follow up; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 24 months or more since the last echocardiogram.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/18/22; There has been treatment or conservative therapy.; shortness of breath, chest pain; EKG, abnormal; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; ABD Pain/sever stenosis of Aorta/can only walk about 100 yards and then tired/dizzy/upper chest lump pressure/numbness in both hands/palpitations racing w/ exertion's. COPD; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here - or Type In Unknown If No Info Given. &gt; Chest pain and hypertension.; This study is being ordered for Vascular Disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &gt; 05/11/2018; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &gt; Diabetes, chest pains, and Bradycardia.; Describe treatment / conservative therapy here - or Type In Unknown If No Info Given &gt; Medication, past echo, she's been in the hospital several times.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here Has coronary artery disease and tachycardia- or Type In Unknown If No Info Given.; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Every six month follow up; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Family History of Heart Disease, Father with History of Heart Disease; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	follow up of established care of shones syndrome variant with mild mitral valve stenosis, subaortic stenosis, bicuspid aortic valve hypoplastic aortic arch; This study is being ordered for Vascular Disease.; 06/01/2010; There has been treatment or conservative therapy.; structural disease, shone's syndrome; surgical repairs, balloon dilation, regular doctor visits, ascending aorta at the dissection repair site; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	HISTORY OF CARDIAC ANOMALY, SYNCOPE AND COLLAPSE; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Hypoplastic Left Heart Syndrome. S/P Fontan Completion in July 2013. S/P Left pulmonary artery stent implantation in August 2016. Cont. Surveillance.; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Hypoplastic Left Heart syndrome. Severe Left Ventricular Hypoplasia. Undergone repair to a Fontan and is known to have a moderate degree of right ventricular dysfunction.; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Impression;;1. Double inlet left ventricle status post Fontan procedure. Clinically stable but showing symptoms related to longstanding Fontan.;2. Mildly decreased left ventricular function.; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Kingston is a 4 y/o with history of an incomplete balanced AV canal and cleft mitral valve with moderate MR and dilated right heart. He is S/P ASD closure with cormatrix and repair of the MV cleft on 10/31/2019. He had a VF when coming off bypass and was ; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Mild dilation of the aortic root and mild leaking of the aortic valve( aortic insufficiency) on her echocardiogram in 2011; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 24 months or more since the last echocardiogram.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Mr. Shue is a 34 year old male with a PMH of PE 01/2022 s/p thrombectomy, DVT dx in 01/2022, family history of heart disease, hx of drug use, hx of Covid-19, tobacco use, and HTN who is here today as a new pt. Patient reports having episodes of sharp ches; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 01/2022; There has been treatment or conservative therapy.; SHORTNESS OF BREATH WITH EXERTION; CHEST PAIN; DIZZINESS; SYNCOPES; MEDICALLY MANAGED; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Ms. Allen is a 55 year old AAF with a past medical history of hypertension, DM, asthma, indigestion, arthritis, and tobacco dependence, referred by Dr. Lindsey Walley for a cardiac evaluation.;Ms. Allen presents here with a complaint of right leg/foot ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1 YEAR; There has not been any treatment or conservative therapy.; SHORTNESS OF BREATH; CARDIAC MURMUR; NUMBNESS AND TINGLING IN LOWER EXTERMITIES; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Ms. Pridgeon is a 58 year old AAF with a past medical history of hypertension, DM, dyslipidemia, seizures, epilepsy, hyperparathyroidism, Vit D deficiency, family history of heart disease, and obesity, referred by Dr. Jared Anderson for a cardiac evaluati; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; SHORTNESS OF BREATH; PALPITATIONS; CHEST PAIN; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	n/a; This study is being ordered for Inflammatory/ Infectious Disease.; 01/28/2022; There has been treatment or conservative therapy.; Shortness of breath, Chest tightness; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Need to evaluate her shortness of breath and chest pain with diastolic dysfunction and CAD; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; It is unknown if the patient has a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	NEEDED BEFORE PACEMAKER INSERTION; This study is being ordered for Vascular Disease.; 2 YRS AGO; There has been treatment or conservative therapy.; He comes to the clinic today for new patient evaluation at the request of Spiller, Ginger, APRN for onset afib. States sometimes he gets SOB when he rides his bicycle 3 times a week, but he thinks is due to be overweight. Family hx of HNT on his father w; He was recently at his PCP for a routine visit. He was found to be in afib with RVR. Xarelto and diltiazem was started. He reports he was completely unaware of the afib. TSH was normal.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	PALPITATIONS; SHORTNESS OF BREATH; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Patient comes in today with recent chest pain and shortness of breath. Along with this she is having palpitations and feeling dizzy and fatigue. She has not had an echo since 2021 and we would like to reassess total heart function to rule out any cardiac.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Patient has had shortness of breath since having COVID in 6/2021, has also had left sided chest pain radiating into shoulder. patient has edema to bilateral lower extremity edema even though she is on a diuretic. Patient has also been experiencing palpita; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	pediatric patient with arrhythmia and chest pain. echo ordered by pediatric cardiologist. patient was sent to us by pcp because we are the closest facility to the family's home.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	POSITIVE FAMILY HISTORY OF CORONARY ARTERY DISEASE, PERSONAL HISTORY OF HYPERTENSIVE DISORDER; This study is being ordered for Vascular Disease.; PATIENT HISTORY STATES RECENT ONSET; There has not been any treatment or conservative therapy.; CHEST PAIN OCCURRING BOTH WITH ACTIVITY AND AT REST BECOMING MORE FREQUENT OVER PAST FEW WEEKS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	pre op; This study is being ordered for Vascular Disease.; heart failure; There has been treatment or conservative therapy.; heart failure, htn, medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Pretransplant Dx: Hypoplastic Left Heart Syndrome. Encounter for aftercare following heart transplant. Congenital Heart Disease; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Pt has Atrial Fibrillation. Need to evaluate heart Function. Rule out Coronary Artery Disease. Pt can not walk on treadmill due to being 386 lbs.; This study is being ordered for Vascular Disease.; May 2022; There has been treatment or conservative therapy.; Chest Pain, Shortness of Breath, Fatigue, Palpitations, Edema, Atrial Fibrillation; Pt is on medications. Pt was recently in the hospital for chest pain. Dietary modifications suggested. Pt weight is 386; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	R/O CAD AS THE CULPRIT OF SYMPTOMS; This study is being ordered for trauma or injury.; 04/2022; It is not known if there has been any treatment or conservative therapy.; SOB ON EXERTION W/DIAPARESIDIZZINESS PALPITATIONS CHEST PAIN RADIATES TO BACK; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Routine Surveillance. remains at risk for late complications of his Fontan repair including ventricular dysfunction, arrhythmias, protein-losing enteropathy, plastic bronchitis, sinus node dysfunction, and progressive AV valve insufficiency.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	SAME testing ordered prev year but not done; This study is being ordered for Vascular Disease.; ONSET INFO NOT IN CHART; There has been treatment or conservative therapy.; ; Medication changed, cardiac defibrillator check,statin for hld.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	shortness of breath, extremity edema.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	SINUS BRADYCARDIA SLOW HR 55; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; This study is NOT being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	SOB, long family history, history of multiple surgeries; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 4/20/2022; There has not been any treatment or conservative therapy.; chest pain, dyspnea and murmur; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Syncope and collapse; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	TAPVR. Total Anomalous Pulmonary Venous Return. He is known postop to have atresia of left lower pulmonary vein.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for a routine follow up of congenital heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; It has NOT been at least 24 months since the last echocardiogram was performed.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered as a post operative evaluation.	6	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for an infection of the heart.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	52	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for evaluation related to chemotherapy (initial evaluation or follow-up).	10	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was Q Wave changes	3	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was ST wave changes	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of an abnormal heart rhythm.	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of congenital heart disease.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of possible or known pulmonary hypertension.	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for none of the above or don't know.; This study is being ordered for pre-operative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1 year since the last Transthoracic Echocardiogram (TTE) was completed; It is unknown if there are there new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1, 2 or 3 years since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been more than 3 years since the last Transthoracic Echocardiogram (TTE) was completed; The patient is asymptomatic	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been more than 3 years since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Moderate stenosis or moderate regurgitation of the mitral or aortic valve is present; This is an initial evaluation after aortic or mitral valve surgery.; It has been less than 1 year since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Moderate stenosis or moderate regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1 year since the last Transthoracic Echocardiogram (TTE) was completed; There are NO new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Severe stenosis or severe regurgitation of the mitral or aortic valve is present; It is unknown if this is an initial evaluation after aortic or mitral valve surgery.; It has been less than 1, 2 or 3 years since the last Transthoracic Echocardiogram (TTE) was completed; It is unknown if there are there new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Severe stenosis or severe regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been more than 3 years since the last Transthoracic Echocardiogram (TTE) was completed; The patient is NOT asymptomatic	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed in the past 6 weeks; Results of other testing completed confirm chest pain was of cardiac origin	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; it is unknown if there are there new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	14	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are NO new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was NOT considered abnormal	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; Something other than Myocardial Perfusion Imaging, Exercise Treadmill Testing, Stress Echocardiography, or EKG has been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; The ordering provider's specialty is NOT Rheumatology.; This study is being ordered for none of the above or don't know.; The member is 35 years old or older.; The member tested positive for Coronavirus (Covid 19)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; This study is being ordered for symptoms of a heart problem	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; Congenital heart defect, congenital syndrome or acquired syndrome best describes my reason for ordering this study.; A previous Transthoracic Echocardiogram was done 3 or more months ago; This is NOT an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is Cardiology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; Post operative exam for cardiac intervention best describes my reason for ordering this study.; This is NOT an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is Cardiology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	3	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is an initial evaluation of suspected valve disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Known or suspected valve disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Known or suspected pulmonary hypertension	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Shortness of breath is not related to any of the listed indications.	Apr-Jun 13 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; This study is being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	Apr-Jun 15 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; This study is NOT being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of heart failure.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Known or suspected Congestive Heart Failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This request is NOT for initial evaluation of a murmur.; This is NOT a request for follow up of a known murmur.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has abnormal heart sounds	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	46	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of a recent myocardial infarction (heart attack).	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	191	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	193	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	200	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is NOT a change in the patient's cardiac symptoms.; It has NOT been at least 24 months since the last echocardiogram was performed.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	366	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	367	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	368	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	THIS IS A CHANGE FROM HIS PREVIOUSLY NORMAL EJECTION FRACTION ON HIS LAST ECHOCARDIOGRAM. THE LV IS NOT DILATED.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	33	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; Follow up for known pulmonary hypertension best describes the reason for ordering this study.; It is not known if a Transthoracic Echocardiogram has been completed	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; Follow up for known pulmonary hypertension best describes the reason for ordering this study.; The last Transthoracic Echocardiogram was Within the last year	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The atrial fibrillation and/or atrial flutter is pre-existing.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	22	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The last Transthoracic Echocardiogram was 6 months or less ago.; New onset murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The last Transthoracic Echocardiogram was more than 6 months ago.; New onset murmur best describes the reason for ordering this study.	3	2022	2022	Apr-Jun









4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms is unknown; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms was more than 6 months ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; Other cardiac stress testing was completed More than 6 months ago; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms was more than 6 months ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms was more than 6 months ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 22 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	Apr-Jun 9 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is known valvular heart disease.; The last Transthoracic Echocardiogram was more than 6 months ago.; The patient's valvular heart disease is moderate to severe.; Pre-existing murmur best describes the reason for ordering this study.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is known valvular heart disease.; The last Transthoracic Echocardiogram was more than 6 months ago.; The patient's valvular heart disease is moderate to severe.; Pre-existing murmur best describes the reason for ordering this study.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is no known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Cannot agree/affirm; It is not known if there is known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; NOT LISTED; There has not been any treatment or conservative therapy.; EXERTIONAL SHORTNESS OF BREATH; HEART FLUTTER; SHOULDER PAIN; LOWER EXT EDEMA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	trying to rule out pulmonary embolism;; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/02/2022 near syncope episode; It is not known if there has been any treatment or conservative therapy.; patient has SOB, chest pain, did have covid 1/2022; trying to rule out PE.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This study is being ordered for Vascular Disease.; Unknown; There has been treatment or conservative therapy.; chest pain/shortness of breath; medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	; This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is NOT for suspected acute aortic pathology, pre-op of mitral valve regurgitation, infective endocarditis, left atrial thrombus, radiofrequency ablation procedure, fever with intracardiac device or completed NON diagnostic TTE.; The patient is 18 years of age or older.	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	Bypass; This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; It is unknown why this study is being requested.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	confirm the artial apendage is adequately closed; This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; It is unknown why this study is being requested.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	Enter answer here - or Type In Unknown If No Info Given. This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; It is unknown why this study is being requested.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	Evaluation of mitral stenosis prior to surgery; This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is NOT for suspected acute aortic pathology, pre-op of mitral valve regurgitation, infective endocarditis, left atrial thrombus, radiofrequency ablation procedure, fever with intracardiac devise or completed NON diagnostic TTE.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	patient has Hypertrophic obstructive cardiomyopathy, ICD implant, NSVT, status post ventricular septal myectomy, has angina pectoris, Rheumatic disorders of both mitral and tricuspid valves and . Mild concentric left ventricular hypertrophy (LVH); This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is NOT for suspected acute aortic pathology, pre-op of mitral valve regurgitation, infective endocarditis, left atrial thrombus, radiofrequency ablation procedure, fever with intracardiac devise or completed NON diagnostic TTE.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested after a completed NON diagnostic transthoracic echocardiogram.; The patient is 18 years of age or older.	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for diagnosis and management of infective endocarditis.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for diagnosis and management of infective endocarditis.; The patient is 18 years of age or older.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of atrial fibrillation or flutter to determine the presence or absence of left atrial thrombus or evaluate for radiofrequency ablation procedure.; The patient is 18 years of age or older.	54	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of persistent fever in a patient with any intracardiac devise (artificial valve, pacemaker, ASD closure device etc); The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of suspected acute aortic pathology such as aneurysm or dissection.; The patient is 18 years of age or older.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for pre-operative evaluation of mitral valve regurgitation; The patient is 18 years of age or older.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	transesophageal echocardiogram with the patient to assess valve structure.; This study is being ordered for Vascular Disease.; 4/20/2022; There has been treatment or conservative therapy.; shortness of breath with exertion; ECHO, ELIQUIS, ASPIRIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	unknown; This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; It is unknown why this study is being requested.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; Assessment of risk for a patient without symptoms or history of ischemic/coronary artery disease best describes the patients clinical presentation.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; It is unknown if the patient had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The patient is experiencing new or changing cardiac symptoms.; The member has known or suspected coronary artery disease.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	16	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; This case was created via RadMD.; Agree; The ordering MDs specialty is Cardiology; Ambulates using assistive device such as crutches, cane, walker, or wheelchair	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; This case was created via RadMD.; Agree; The ordering MDs specialty is Cardiology; The patient had a Recent surgery, within the last 3 months, involving a lower extremity, such as hip, knee replacement or repair	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; This case was created via RadMD.; Agree; The ordering MDs specialty is Cardiology; The patient is On continuous oxygen therapy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is a Medicare member.; This case was created via RadMD.; The patient has known hemodynamically significant Coronary Artery Disease (CAD) (known coronary lesion of greater than 70%); Agree; The ordering MDs specialty is Cardiology	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is a Medicare member.; This case was created via RadMD.; The patient has new or worsening symptoms not medically controlled ; Agree; The ordering MDs specialty is Cardiology	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is Left Anterior Descending	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is unknown	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has None of the above	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has None of the above	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; This case was created via RadMD.; The patient has a Body Mass Index (BMI) greater than 40; Agree; The ordering MDs specialty is Cardiology; The last Stress Echocardiogram or Myocardial Perfusion Imaging procedure was performed greater than 12 months	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; This case was created via RadMD.; The patient has a history of Coronary Artery Bypass Surgery (CABG); Agree; The ordering MDs specialty is Cardiology; The last Stress Echocardiogram or Myocardial Perfusion Imaging procedure was performed greater than 12 months	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; The member does not have known or suspected coronary artery disease	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; Other than listed above best describes the patients clinical presentation.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; Pre operative evaluation for non cardiac surgery requiring general anesthesia best describes the patients clinical presentation.; This is a Medicare member.; The member has a history of cardiac disease; Cardiac testing has NOT been performed recently; This case was created via RadMD.; Agree; The ordering MDs specialty is Cardiology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; Routine follow up of patient with previous history of ischemic/ coronary artery disease without new or changing symptoms best describes the patients clinical presentation.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; The patient had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The patient is experiencing new or changing cardiac symptoms.; The member has known or suspected coronary artery disease.	13	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	193	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	194	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; To evaluate the heart prior to non-cardiac surgery.; The member does not have known or suspected coronary artery disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the Neck.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary		1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Ascending thoracic aneurysm. 11/11/2020 CTA of head and neck: 4.1 cm.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; EKG shows no new significant interval changes. Cardiac issues, as listed in the above list of problems, were addressed and discussed. Modification of risk factors and education provided. Written educational information given on how to reduce the risk of h; it is not known if there has been any treatment or conservative therapy.; Ascending thoracic aneurysm. 11/11/2020 CTA of head and neck: 4.1 cm.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; Another abnormality is related to the suspicion of cancer in this patient.; This is a request for a Chest CT.; This study is being requested for suspected cancer or tumor.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; This study is being requested for a congenital abnormality; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	chest pain, diaphoresis, confusion; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Vascular Disease; The ordering MDs specialty is NOT Thoracic Surgery or Vascular Surgery. ; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known or Suspected Congenital Abnormality.; The abnormality is of a cardiac nature.; There is no known or suspected coarctation of the aorta.; There is no other type of arch anomaly.; Yes, this is a request for a Chest CT Angiography.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	MRI spine for known history of impingement; MRI spine for known history of impingement.; There has been treatment or conservative therapy.; Neck pain;Hip pain;Pain in right shoulder;Other chronic pain; Seen at Dr. Sayer's office and order was sent to AHH for MRI.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI spine for known history of impingement; MRI spine for known history of impingement.; There has been treatment or conservative therapy.; Neck pain;Hip pain;Pain in right shoulder;Other chronic pain; Seen at Dr. Sayer's office and order was sent to AHH for MRI.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the lower extremity.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary		1	2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	Ascending thoracic aneurysm. 11/11/2020 CTA of head and neck: 4.1 cm.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; EKG shows no new significant interval changes. Cardiac issues, as listed in the above list of problems, were addressed and discussed. Modification of risk factors and education provided. Written educational information given on how to reduce the risk of h; it is not known if there has been any treatment or conservative therapy.; Ascending thoracic aneurysm. 11/11/2020 CTA of head and neck: 4.1 cm.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a vascular disease.; The requested studies are being ordered for known or suspected aneurysms and are being ordered by a surgeon or by the attending physician on behalf of a surgeon.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; This study is being ordered for Vascular Disease.; 70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; There has been treatment or conservative therapy.; 70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; 70 y/o female here for 1 month f/u.; On last visit, Increase Metoprolol Succinate ER100 MG, BID; Note: Hasn't had sleep study; As of last visit, we thought she was leaving here with hydralazine 50 mg po tid. ; Now she tells me ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdomen.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	chest pain, diaphoresis, confusion; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Vascular Disease; The ordering MDs specialty is NOT Thoracic Surgery or Vascular Surgery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Pheochromocytoma, Normetanephrine level was significantly high-473; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	74185	Magnetic resonance angiography, abdomen, with or without contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a MR Angiogram of the abdomen.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	75557	Cardiac magnetic resonance imaging for morphology and function without contrast material;	Radiology Services Denied Not Medically Necessary	This is a request for a heart or cardiac MRI	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	75571 Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Radiology Services Denied Not Medically Necessary	; This is a request for a CT scan for evaluation of coronary calcification.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	75571 Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Radiology Services Denied Not Medically Necessary	She said she started walking less during the pandemic and now every time she tries to walk, she has pressure and tightness, shortness of breath, and palpitations.; This is a request for a CT scan for evaluation of coronary calcification.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	75572 Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	Radiology Services Denied Not Medically Necessary	This is a request for a Heart CT.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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)	Radiology Services Denied Not Medically Necessary	Abnormal treadmill stress test. 1) Abnormal Bruce ETT for ischemia with no angina 2) 1mm ST depression (flat-sloping) at peak stress exercising 3) Duke treadmill score of +2 4) hypertensive response to stress (max 212 mmHg) 5) average exercise capacity; This is a request for CTA Coronary Arteries.; A study not listed has been completed.; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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)	Radiology Services Denied Not Medically Necessary	CAD EVAL FOR CHEST PAIN, SHORTNESS OF BREATH; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; CHEST PAIN, SHORTNESS OF BREATH; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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)	Radiology Services Denied Not Medically Necessary	Chest pain and shortness of breath, chest pain has been getting worse with activity. Entire left side of the body was tingling last time it happened.; This is a request for CTA Coronary Arteries.; Another test besides a Nuclear Cardiology Study, CTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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)	Radiology Services Denied Not Medically Necessary	She presents today for follow up. She still reports occ feelings of chest pressure/tightness that comes and goes along with an episode the other day of feeling hot, sweaty and just "out of sorts", she does notice that these episodes seem to be worse when ; This is a request for CTA Coronary Arteries.; A study not listed has been completed.; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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)	Radiology Services Denied Not Medically Necessary	This is a request for CTA Coronary Arteries.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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)	Radiology Services Denied Not Medically Necessary	This is a request for CTA Coronary Arteries.; The study is requested for congestive heart failure.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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)	Radiology Services Denied Not Medically Necessary	This is a request for CTA Coronary Arteries.; The study is requested for known or suspected valve disorders.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 5 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Assessment: ;1. CAD in native artery - I25.10 (Primary), On Plavix. ;2. Syncope, unspecified syncope type - R55 ;3. Essential hypertension - I10, Continue medical therapy ;4. Type 2 diabetes mellitus with other circulatory complications - E11.59 ; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 16 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Assessment: ;1. CAD in native artery - I25.10 (Primary), On Plavix. ;2. Syncope, unspecified syncope type - R55 ;3. Essential hypertension - I10, Continue medical therapy ;4. Type 2 diabetes mellitus with other circulatory complications - E11.59 ; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Assessments ; ;1. HTN (hypertension), benign - I10 (Primary), She c/o worse BP, SBP up to 130-140. She has been increased from 12.5 mg of HCTZ to 25 mg po daily. The Atenolol was increased from 25 mg to 50 mg po daily, and she felt worse, now back to ; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Chief Complaints: ; ; 1. New Pt/Per KTB- Ca score 500+, +fam hx. ; ; HPI: ; HPI: ; Initial evaluation; He underwent keep the beat screen due to family history; Previously has history of stroke in 2005. He had some spec; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	DYSPNEA ON EXERTION, hypertension; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	HPI: ; Ms. Lawrence is here to establish care after recent ER visit for chest pain with negative work up including negative CTA PE protocol. She has history of HTN, COPD, hyperlipidemia, and anxiety. She reports pain the starts in the mid back and; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	HPI: ; she is feeling okay; HR has been up; needs echo; monitor a year ago with elevated base HR.; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Mrs Moody is a 61 year old female here for chest pain. She developed chest, neck and left arm pain in the middle of the night 4/15/22. She had associated nausea. I seemed to get better when she got a Nitro at the Cabot ED. She has had some spells of chest; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Mrs. Weathersby is a 64 year old female here to follow up after presenting to AHH ER 4/17/2022 with chest pain. MI ruled out. She also reports bilateral LE edema. She saw Arkansas Cardiology in 2017 complaining of chest pain and edema. A stress echo was o; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	New pt. with Anxiety, DM and HTN referred by Karl Sandberg for palpitations.; New patient appt for evaluation of chest pain. Described as sharp, shooting pains. Comes on intermittently without clear exertional aggravators. Some vague dyspnea associa; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Patient has chest pains, some sharp and non exertional. some feels like pressure. Has been getting shortness of breath. He had to stop and catch his breath while setting up a campsite a few weeks ago. He has been diagnosed with diabetes and peripheral ne; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Patient with with CAD (CABG; 8/2021), AS (AVR;8/2021), and HTN . Complains today of shortness of breath and fatigue. Blood pressure is 161/70, BMI is 33.63. Also has LE edema; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	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	Radiology Services Denied Not Medically Necessary	Pt here for followup of bradycardia and sick sinus syndrome. She denies any chest pain. She denies any syncope. She has been diagnosed with RA and Sjogren's disease. She is having pain on her right side. She will have her medtronic pacemaker interrogated ; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; Describe primary symptoms here Palpitations, chest pain- or Type In Unknown If No Info Given; Describe treatment / conservative therapy here Oral medications - or Type In Unknown If No Info Given; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; NOT LISTED; There has been treatment or conservative therapy.; RIGHT SIDED CHEST PAIN; SHORTNESS OF BREATH; FATIGUE; LOWER EXT EDEMA; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; CHEST PAIN; LOWER EXT EDEMA; MEDICATION; TMST; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; Enter date of initial onset here - or Type In Unknown if No Info 4/12/22 1ST VISIT TO CARDIOLOGIST; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; Enter date of initial onset here UNKNOWN; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; NOT SPECIFIED; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	1. Chest pain with dyspnea: Angina versus possible pulmonary embolus given the patient's recently diagnosed thromboembolic disease. ;2. Thromboembolic disease: The patient with deep venous thrombosis. ;3. Palpitations; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	1. Chest pain, etiology unknown. ;2. Methamphetamine use. ;3. Stable blood pressure. ;4. Hyperlipidemia, on medical therapy. ;5. Ongoing cigarette abuse.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	1. Coronary artery disease: The patient is having exertional chest pains that is associated with shortness of breath ;2. Takotsubo cardiomyopathy with mild left ventricular systolic dysfunction.;3. Dyslipidemia.;4. Hypertension: Blood pressure is; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is less than 20	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	1. Exertional dyspnea in patient at intermediate risk for coronary disease likely indicative of angina. ;2. Hypertension: Blood pressure is elevated today.;3. Exertional chest discomfort, likely secondary to angina. ;4. Sinus tachycardia, possibly ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	1. Recent CVA. We will start the patient on aspirin and a statin.;2. Chest pain. Symptoms suggestive of angina. The patient has a strong family history of coronary artery disease. We will get a Lexiscan stress test as the patient says he will not b; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	41 y.o. Caucasian male is here today for follow up for hypertension, tricuspid regurgitation, history of tobacco use, and history of methamphetamine abuse. Patient is accompanied by his girlfriend. He reports shortness of breath with any exertion and lo; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	62 y.o. Caucasian female is here today for follow up for hypertension, hypertensive heart disease, left ventricular diastolic dysfunction, mitral and tricuspid regurgitation, and hypercholesterolemia. Patient reports she is scheduled for a lumpectomy on ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	A Lexiscan Cardiolite stress test has been requested to evaluate for the presence and extent of coronary artery disease.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Angina/Chest Pain, Diabetes: Y, Hypertension: Y; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	ankle swelling; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2 months ago; There has not been any treatment or conservative therapy.; DVT, HLD, HTN, chest pains, palpitations, SOB, leg swelling, syncope; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	c/o chest tightness, fatigue w exertion, dyspnea on exertion, family hx, inferior ST elevation; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	CAROTID BRUIT;ANGINA;CHEST TIGHTNESS;GRADE 3/6 SYSTOLIC MURMUR; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; PATIENT WAS NEW TO US ON 4/15/22. DATE OF ORIGINAL ONSET IS UNKNOWN.; There has not been any treatment or conservative therapy.; SYNCOPAL EPISODES ALONE AND WITH EXERTION.;ANGINA/CHEST PRESSURE;CAROTID BRUIT ON EXAM;GRADE 3/6 SYSTOLIC CARDIAC MURMUR.;FAINT FEELING WITH LIFTING ARMS ABOVE HEAD.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain is atypical. Has been having hot flashes, worse after eating. Having night sweats and increased irritability. Cramping over whole body while standing has worsened. 2-3 times per day he has chest pressure with SOB, sometimes with a pain on inhal; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain substernal raidates to Left arm accompanied with diaphoresis and dyspnea;;hypertension;;COPD; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain, band like squeezing sensation around her chest, palpitations, shortness of breath during cp episodes, hypertension; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is not know	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain, family hx of heart disease, diabetic, hyperlipidemia, hypertension; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is less than 20	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; chest pain; There has not been any treatment or conservative therapy.; chest pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	chest pain;palpitations with lightheadedness;diaphoresis nausea/dyspnea;bmi 35;ekg sinus rhythm with right intraventricular conduction delay poor R wave progression anteriorly;nondiagnostic Q waves inferiorly; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	CHEST PAIN. SHARP PAIN IN MIDDLE OF CHEST. NON EXTERIONAL AND LASTS FOR A SECOND OR TWO. LEFT SIDED CHEST PAIN DESCRIBED AS TIGHTNESS. SYMPTOMS WORSE AT REST. CURRENT SMOKER.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Chest pain/anginal equiv, prior revascularization; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	complainants of CP. PHI: Patient was driving and developed some chest pain that has since resolved. He has never had this type of pain before. Felt like tightness that would not release. He is a smoker. Also reports some dyspnea with exertion and lack of; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Complaining of new onset angina. As it was mentioned in the last visit, he underwent PTCA stent of the RCA and distal LAD.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Coronary arteriosclerosis, PCI 5 yrs ago; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Coronary artery disease s/p LAD and RCA stent ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	diabetes,chest pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Dyspnea on exertion, Swelling of lower leg, Essential hypertension; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	EKG done in the clinic today showed sinus bradycardia. EVALUATION; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2/19/2022; There has been treatment or conservative therapy.; DIZZINESS, MILD CHEST PAIN, SOB; MEDICATION COMPLIANT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	EKG done in clinic was unremarkable, ordered US Duplex Arterial Legs to rule out PAD; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2 weeks ago; There has been treatment or conservative therapy.; hypertension, intermittent chest pain and leg pain x 2 weeks, shortness of breath with activity, fatigue, numbness in arms, family hx of CAD - most likely flow murmur, r/o aortic sclerosis; continue current medication, smoking cessation counseling, exercise, watch diet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is not know	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; N/A; There has been treatment or conservative therapy.; Patient has , hypertension, chest pain; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; ABD Pain/sever stenosis of Aorta/can only walk about 100 yards and then tired/dizzy/upper chest lump pressure/numbness in both hands/palpitations racing w/ exertion's. COPD; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 8/2020; There has been treatment or conservative therapy.; chest pain SOB; multiple stents, medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	EVALUATE VALVULAR STATUS AND RULE OUT ISCHEMIC DISEASE DUE TO SYMPTOMS AND STRONG FAMILY HISTORY OF HEART DISEASE.; This study is being ordered for Vascular Disease.; PATIENT HAS BEEN HAVING CHEST DISCOMFORT SINCE FALL OF 2021. MURMUR AND VOLUME OVERLOAD IS NEW ONSET.; There has been treatment or conservative therapy.; DYSPNEA/ANGINA WITH ANY EXERTION;CHEST PRESSURE WITH ANY EXERTION;SYSTOLIC MURMUR BEST HEARD AT MITRAL AREA.;ABNORMAL EKG; PATIENT WAS RECENTLY DIAGNOSED WITH HYPERLIPIDEMIA AND STARTED ON A STATIN.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	EVALUATE VALVULAR STATUS DUE TO SYSTOLIC MURMUR AND ANGINA/DYSPNEA; This study is being ordered for Vascular Disease.; ONSET WAS A "FEW WEEKS AGO" FOR CHEST PAIN/DYSPNEA AND NEW ONSET HYPERTENSION. MURMUR IS A NEW FINDING. THIS IS FIRST CARDIAC EVALUATION FOR THIS PATIENT.; There has been treatment or conservative therapy.; NEW ONSET HYPERTENSION;ANGINA ON EXERTION;DYSPNEA ON EXERTION;NEW SYSTOLIC MURMUR; PATIENT WAS PRESCRIBED AMLODIPINE ON 3/28 BY PRIMARY CARE FOR NEW ONSET HYPERTENSION.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Evaluation of LV function. First time seeing this patient.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown, patient first saw us 04/29/22; There has been treatment or conservative therapy.; Shortness of Breath, Edema, Chest Pain, Tobacco Abuse.; PCP treated with medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Family Hx of premature CAD, father with MI in early 60's; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; March 2022; There has been treatment or conservative therapy.; HTN, fatty liver, multifactorial fatigue, dyspnea, obesity, incorrect use of medication; medication, patient education; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Having episodes of chest pressure at times exertional. BP and HR controlled. Has diabetes. Unable to walk on TM Rare episodes of palpitations.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	high BP, CVA in 2019 with loss of peripheral vision, lack of energy, hx of prostate cancer, DM, HLD, father and paternal aunt CAD, CT from 03/21 shows evidence of atherosclerosis involving the aorta; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	HX OF cad, chest pains; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Hx of Methamphetamine abuse, - Methamphetamine induced cardiomyopathy. ECHO 5/12/22 - LVEF 25-30%. Will add Farxiga , continue Bumex and Coreg. Will request for life vest. Given symptoms and risk factors, will proceed with Lexiscan SPECT to rule out CAD; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is not know	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	left arm pain;elevated troponin;hypertension;hypothyroidism;family history cad;smokes half ppd since age 18;uses methamphetamine; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Mr. Davis is a 44 year old WM with a past medical history of Paroxysmal atrial fibrillation, hypertension, dyslipidemia, DM, GERD, arthritis, and obesity, referred by Dr. Tim Simon for a cardiac evaluation.; Apparently Mr. Davis has been diagnosed with ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; SHORTNESS OF BREATH; MEDICALLY MANAGED; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Mr. White is a 58 year old BM with a past medical history of CAD s/p PCI to the mid RCA in July 2016, HTN, sleep apnea, dyslipidemia, and diabetes mellitus type II. He is here for a 3 month follow up. He reports occasional left side chest pain and palp; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; LAST TWO NIGHTS; There has been treatment or conservative therapy.; CHEST PAIN; SHORTNESS OF BREATH; LOWER EXT EDEMA;; INCLUSIVE TMST 2021; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Ms. Allen is a 55 year old AAF with a past medical history of hypertension, DM, asthma, indigestion, arthritis, and tobacco dependence, referred by Dr. Lindsey Walley for a cardiac evaluation.; Ms. Allen presents here with a complaint of right leg/foot ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1 YEAR; There has not been any treatment or conservative therapy.; SHORTNESS OF BREATH; CARDIAC MURMUR; NUMBNESS AND TINGLING IN LOWER EXTERMITY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Ms. Clemons is a 49 year old female with a past medical history of diabetes and anemia. She is referred by her primary care provider, Carla Devose, APRN, for a cardiac evaluation. Today, Ms. Clemons reports having a heart murmur as a child. She reports; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; CHEST PAIN; PALPITATIONS; LOWER EXTREMITY EDEMA; DIZZINESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Ms. Cobbs is a 50 year old BW with a past medical history of hypertension, thyroid disorder (thyroidectomy in July 2021), asthma, and anemia. She is here today for a follow up. She reports worsening shortness of breath and states she is scheduled to see; This study is being ordered for Vascular Disease.; MONTHS; There has been treatment or conservative therapy.; She reports chest pain, described as "a pinch in her chest," episodes lasting 20-30 minutes, resolving when she sits and relaxes. She reports "heart racing" when she moves, resolving when she stops moving. She reports lower extremity edema that is daily; TMST W/ ISOLATED PVC'S--MANAGED MEDICALLY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Ms. Fortenberry is a 60 year old with a past medical history of hypertension, hypothyroidism, and depression. She is here today for a follow up after testing. She reports shortness of breath that is unchanged from previous visit. She reports a burning; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Ms. Pridgeon is a 58 year old AAF with a past medical history of hypertension, DM, dyslipidemia, seizures, epilepsy, hyperparathyroidism, Vit D deficiency, family history of heart disease, and obesity, referred by Dr. Jared Anderson for a cardiac evaluati; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; SHORTNESS OF BREATH; PALPITATIONS; CHEST PAIN; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Ms. Stanley is a 57-year-old white female with no significant past medical history presents with occasional sharp to dull aching chest discomfort that happens mostly with exertion. She has history of hiatal hernia and GERD for which she takes omeprazole.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Ms. Sterling is a 56 y/o female with a PMH of asthma, HLD, HTN, anxiety, depression, and ADHD who is being referred by her PCP APRN Joseph Brown for chest pain.; During episodes of chest pain patient states it is located on the left side of her; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for Inflammatory/ Infectious Disease.; 01/28/2022; There has been treatment or conservative therapy.; Shortness of breath, Chest tightness; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Need to eval for CAD and heart disease; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; radiating chest pain and pre-syncope; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	No stress echos done within 60 mile radius. Patient is not able to walk on a treadmill due to extreme SOB and knee issues.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is less than 20	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	None; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	NSTEMI (non-ST elevated myocardial infarction);Coronary artery disease involving native coronary artery of native heart without angina pectoris;;History of non-ST elevation myocardial infarction (NSTEMI);;Essential hypertension;;Dyslipidemia, goa; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	NSVT; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient had angioplasty with stent --07/2021Eval of 07/2021 for a non ST Elevation MICTA showed high grade stenosis--right distal coronary artery Patient experiencing chest pain and discomfort; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient had a recent CCTA to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient had GXT (Treadmill) stress test on 05/04/22 that was inconclusive. Patient has chest pain that radiates to his left arm; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	patient has shortness of breath with activity, dizziness, rapid and irregular heart rate, muscle weakness and cramping, hypertension, apnea and History of COVID; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	patient is having chest pain, sob with minimal exertion.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient is scheduled for echo and stress testing as well; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient was referred by emergency room for evaluation of chest pain with an abnormal ECG. Patient with a history of hyperlipidemia, hypertension, and with a coronary risk factors that include a strong family history and male gender. Patients BP on evalua; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient with CP and risk factors; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient with known coronary artery disease with complaint of worsening fatigue and shortness of breath. Patient has known hypertension, hyperlipidemia, and moderately dilated left atrium, and mild left ventricular hypertrophy.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	please see clinicals; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	POSITIVE FAMILY HISTORY OF CORONARY ARTERY DISEASE, PERSONAL HISTORY OF HYPERTENSIVE DISORDER; This study is being ordered for Vascular Disease.; PATIENT HISTORY STATES RECENT ONSET; There has not been any treatment or conservative therapy.; CHEST PAIN OCCURRING BOTH WITH ACTIVITY AND AT REST BECOMING MORE FREQUENT OVER PAST FEW WEEKS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	R/O CAD AS THE CULPRIT OF SYMPTOMS; This study is being ordered for trauma or injury.; 04/2022; It is not known if there has been any treatment or conservative therapy.; SOB ON EXERTION W/DIAPHRAGMATIC PALPITATIONS CHEST PAIN RADIATES TO BACK; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	SAME testing ordered prev year but not done; This study is being ordered for Vascular Disease.; ONSET INFO NOT IN CHART; There has been treatment or conservative therapy.; ; Medication changed, cardiac defibrillator check, statin for hld.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	SOB, CHEST PAIN; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 4/28/22; There has not been any treatment or conservative therapy.; PT C/O SOB, CHEST PAIN AND HYPERTENSION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	symptomatic 64 yr old pt w/ DMII and strong family hx of heart disease. Need eval; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is not known	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	symptoms of low output, says he cannot do anything and I said he needs an exercise nuclear to check on that blockage that Dr. Elesber documented about 3 years ago to make sure that has not progressed; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	The patient did NOT have a prior CABG.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block; The patient has NOT had a prior stent; The patient does NOT have documented ejection fraction on prior TTE (Transthoracic Echocardiogram) of less than 40%	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	The patient did NOT have a prior CABG.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block; The patient has NOT had a prior stent; The patient does NOT have documented ejection fraction on prior TTE (Transthoracic Echocardiogram) of less than 40%	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	The patient did NOT have a prior CABG.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block; The patient had a prior stent; The patient has documented ejection fraction on prior TTE (Transthoracic Echocardiogram) of less than 40%	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	THE PATIENT HAD A LOOP MONITOR AND HAD EPISODES OF SYNCOPES WITH THE LOOP MONITOR. SHE ALSO HAD AN ABNORMAL EKG. SHE IS A SMOKER.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Assessment of risk for a patient without symptoms or history of ischemic/coronary artery disease best describes the patients clinical presentation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; This case was created via RadMD.; Agree; The ordering MDs specialty is Cardiology; Ambulates using assistive device such as crutches, cane, walker, or wheelchair	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a Body Mass Index (BMI) greater than 40	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a documented ejection fraction of less than or equal to 40%; When the last Myocardial Perfusion Imaging procedure was performed is unknown	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is Left Anterior Descending	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Pre operative evaluation for non cardiac surgery requiring general anesthesia best describes the patients clinical presentation.; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Routine follow up of patient with previous history of ischemic/ coronary artery disease without new or changing symptoms best describes the patients clinical presentation.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; It is not known if the member has known or suspected coronary artery disease.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for congestive heart failure.; It is not known if the member has known or suspected coronary artery disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for congestive heart failure.; The member does not have known or suspected coronary artery disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for evaluation of the heart prior to non cardiac surgery.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected cardiac septal defect.	5	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	Apr-Jun 30 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; SHORTNESS OF BREATH WITH EXERTION; HEART FLUTTERING/BL EDEMA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; 4 months ago;Jan 2022; There has not been any treatment or conservative therapy.; 12/22/21 Pt having difficulty with sleep after having car broken into. Last night she felt a heaviness on her chest and noticed her heart was racing. States her heart rate has stayed elevated today on and off;;5/12/2022 About 4 months ago she has an epi; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for Vascular Disease.; 1/2021; There has been treatment or conservative therapy.; Chest pain and shortness of breathe.; Medication.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	will fax additional clinicals; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 06/01/2022; There has not been any treatment or conservative therapy.; Chest Pain/Fatigue Diaphoresis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	Radiology Services Denied Not Medically Necessary	This is a request for a MUGA scan.; This study is being ordered for Known Cardiomyopathy/ Myocarditis; It is not known if there are EKG findings consistent with cardiomyopathy or myocarditis; There are no stress echocardiogram findings consistent with cardiomyopathy or myocarditis; It is not known if there are abnormal lab findings consistent with cardiomyopathy or myocarditis;	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	78813 Positron emission tomography (PET) imaging; whole body	Radiology Services Denied Not Medically Necessary	This Pet Scan is being requested for Other; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; Describe primary symptoms here Palpitations, chest pain- or Type In Unknown If No Info Given; Describe treatment / conservative therapy here Oral medications - or Type In Unknown If No Info Given; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; NOT LISTED; There has been treatment or conservative therapy.; RIGHT SIDED CHEST PAIN; SHORTNESS OF BREATH; FATIGUE; LOWER EXT EDEMA; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; CHEST PAIN; LOWER EXT EDEMA; MEDICATION; TMST; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; Enter date of initial onset here - or Type In Unknown If No Info 4/12/22 1ST VISIT TO CARDIOLOGIST; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; NOT SPECIFIED; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	1. Ref by ARcare for hypertension and heart palpitations. ;;; ROS: ; General/Constitutional: ; Poor appetite no. Weight gain no. Weight loss without dieting no. Fever no. Excessive Sweating yes . Chronic Sense of Fatigue no. Fatigue yes . ; This study is being ordered for Congenital Anomaly.; 1. Ref by ARcare for hypertension and heart palpitations. ;;; ROS: ; General/Constitutional: ; Poor appetite no. Weight gain no. Weight loss without dieting no. Fever no. Excessive Sweating yes . Chronic Sense of Fatigue no. Fatigue yes . ; There has not been any treatment or conservative therapy.; 1. Ref by ARcare for hypertension and heart palpitations. ;;; ROS: ; General/Constitutional: ; Poor appetite no. Weight gain no. Weight loss without dieting no. Fever no. Excessive Sweating yes . Chronic Sense of Fatigue no. Fatigue yes . ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Cardiolite imaging study to assess for ongoing ischemic burden;echocardiogram to assess the status of her mitral valve regurgitation and LV function;Sublingual nitroglycerin will be called to her local pharmacy; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Patient seen in clinic on 3/28/22. Symptoms began 03/21/2022.; There has been treatment or conservative therapy.; 1 week history of intermittent angina at rest with exertion lasting minutes in duration with nausea. She is not taking any nitrates. Last echo showed mild mitral regurgitation with normal ejection fraction.; sublingual Nitroglycerin 0.4mg 1 tablet as needed for chest pain every 5 minutes up to 3 doses. called in to local pharmacy.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	CAROTID BRUIT;ANGINA;CHEST TIGHTNESS;GRADE 3/6 SYSTOLIC MURMUR; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; PATIENT WAS NEW TO US ON 4/15/22. DATE OF ORIGINAL ONSET IS UNKNOWN.; There has not been any treatment or conservative therapy.; SYNCOPAL EPISODES ALONE AND WITH EXERTION.;ANGINA/CHEST PRESSURE;CAROTID BRUIT ON EXAM;GRADE 3/6 SYSTOLIC CARDIAC MURMUR.;FAINT FEELING WITH LIFTING ARMS ABOVE HEAD.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	EKG done in the clinic today showed sinus bradycardia. EVALUATION; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2/19/2022; There has been treatment or conservative therapy.; DIZZINESS, MILD CHEST PAIN, SOB; MEDICATION COMPLIANT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	EKG done in clinic was unremarkable, ordered US Duplex Arterial Legs to rule out PAD; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2 weeks ago; There has been treatment or conservative therapy.; hypertension, intermittent chest pain and leg pain x 2 weeks, shortness of breath with activity, fatigue, numbness in arms, family hx of CAD - most likely flow murmur, r/o aortic sclerosis; continue current medication, smoking cessation counseling, exercise, watch diet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &t;5/4/2022; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &t; chest, arm pain, shortness of breath and palpitations; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; N/A; There has been treatment or conservative therapy.; Patient has , hypertension, chest pain; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 8/2020; There has been treatment or conservative therapy.; chest pain SOB; multiple stents, medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 10/2020; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given Medication.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. &t; No information given.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &t; 4/21/2021; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &t; Shortness of breath, heaviness in the chest.; Describe treatment / conservative therapy here - or Type In Unknown If No Info Given &t; Stent placement.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	EVALUATE VALVULAR STATUS AND RULE OUT ISCHEMIC DISEASE DUE TO SYMPTOMS AND STRONG FAMILY HISTORY OF HEART DISEASE.; This study is being ordered for Vascular Disease.; PATIENT HAS BEEN HAVING CHEST DISCOMFORT SINCE FALL OF 2021. MURMUR AND VOLUME OVERLOAD IS NEW ONSET.; There has been treatment or conservative therapy.; DYSPNEA/ANGINA WITH ANY EXERTION;CHEST PRESSURE WITH ANY EXERTION;SYSTOLIC MURMUR BEST HEARD AT MITRAL AREA.;ABNORMAL EKG; PATIENT WAS RECENTLY DIAGNOSED WITH HYPERLIPIDEMIA AND STARTED ON A STATIN.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	EVALUATE VALVULAR STATUS DUE TO SYSTOLIC MURMUR AND ANGINA/DYSYPNEA; This study is being ordered for Vascular Disease.; ONSET WAS A "FEW WEEKS AGO" FOR CHEST PAIN/DYSYPNEA AND NEW ONSET HYPERTENSION. MURMUR IS A NEW FINDING. THIS IS FIRST CARDIAC EVALUATION FOR THIS PATIENT.; There has been treatment or conservative therapy.; NEW ONSET HYPERTENSION;ANGINA ON EXERTION;DYSYPNEA ON EXERTION;NEW SYSTOLIC MURMUR; PATIENT WAS PRESCRIBED AMLODIPINE ON 3/28 BY PRIMARY CARE FOR NEW ONSET HYPERTENSION.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Evaluation of LV function. First time seeing this patient.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown, patient first saw us 04/29/22; There has been treatment or conservative therapy.; Shortness of Breath, Edema, Chest Pain, Tobacco Abuse.; PCP treated with medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Family Hx of premature CAD, father with MI in early 60's; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; March 2022; There has been treatment or conservative therapy.; HTN, fatty liver, multifactorial fatigue, dyspnea, obesity, incorrect use of medication; medication, patient education; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Known CAD and stents in heart.; This study is being ordered for Vascular Disease.; 05/2022; There has not been any treatment or conservative therapy.; Chest pain and shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Mr Stafford is 38 year old white male with a past medical history of Diabetes, Hypertension, family history of CAD, RA, and Hyperlipidemia who is here as a new patient for cardiac evaluation. Pt was recently seen in the ED on 04/14/22 where he states he w; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/14/2022; There has been treatment or conservative therapy.; CHEST PAIN; SHORTNESS OF BREATH; DIZZINESS; PALPITATIONS; EMERGENCY ROOM VISIT TREATED WITH MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Mr. Davis is a 44 year old WM with a past medical history of Paroxysmal atrial fibrillation, hypertension, dyslipidemia, DM, GERD, arthritis, and obesity, referred by Dr. Tim Simon for a cardiac evaluation.; Apparently Mr. Davis has been diagnosed with ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; SHORTNESS OF BREATH; MEDICALLY MANAGED; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Mr. Johnny Henley is a 61 year old Caucasian male with a chronic past medical history of ischemic cardiomyopathy s/p dual chamber AICD, CAD s/p 5V CABG and stent placement, hypertension, hyperlipidemia, diabetes, and obesity, here today for follow up. Pt ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; APRIL 2022; There has been treatment or conservative therapy.; SHARP, LEFT SIDED CHEST PAIN; NAUSEATED; HEADACHE; HEART BURN; WORSENING SHORTNESS OF BREATH WITH MINIMAL ACTIVITY; PT HAS A DUAL CHAMBER AICD S/P 5V CABG AND STENT PLACEMENT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Mr. Mcnutt is a 60 year old male with a PMH of bipolar disorder and COPD who is here today as a new pt. Pt states he has had worsening chest pain and shortness of breath with minimal activity and increased fatigue. He states that he can barely walk across; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; CHEST PAIN; SHORTNESS OF BREATH; DIZZINESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Mr. Walker is a 59 year old African American male with a chronic past medical history of CAD, hypertension, hyperlipidemia, and obesity, here today for 6 month follow up. Patient reports having tightness to midsternal chest area when he wakes in the AM la; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; Patient reports having tightness to midsternal chest area when he wakes in the AM lasting for a few minutes. Patient has only exertional shortness of breath.; LHC: 01/02/2014 - Obstructive 1V involving the mid OM w/direct stenting of the OM1. LVEF 55%; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Mr. White is a 58 year old BM with a past medical history of CAD s/p PCI to the mid RCA in July 2016, HTN, sleep apnea, dyslipidemia, and diabetes mellitus type II. He is here for a 3 month follow up. He reports occasional left side chest pain and palpi; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; LAST TWO NIGHTS; There has been treatment or conservative therapy.; CHEST PAIN; SHORTNESS OF BREATH; LOWER EXT EDEMA.; INCONCLUSIVE TMST 2021; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Ms. Clemons is a 49 year old female with a past medical history of diabetes and anemia. She is referred by her primary care provider, Carla Devose, APRN, for a cardiac evaluation. Today, Ms. Clemons reports having a heart murmur as a child. She reports; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; CHEST PAIN; PALPITATIONS; LOWER EXTREMITY EDEMA; DIZZINESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Ms. Cobbs is a 50 year old BW with a past medical history of hypertension, thyroid disorder (thyroidectomy in July 2021), asthma, and anemia. She is here today for a follow up. She reports worsening shortness of breath and states she is scheduled to see; This study is being ordered for Vascular Disease.; MONTHS; There has been treatment or conservative therapy.; She reports chest pain, described as "a pinch in her chest," episodes lasting 20-30 minutes, resolving when she sits and relaxes. She reports "heart racing" when she moves, resolving when she stops moving. She reports lower extremity edema that is daily; TMST W/ ISOLATED PVC'S--MANAGED MEDICALLY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Need to eval for CAD and heart disease; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; radiating chest pain and pre-syncope; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	No information Given; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 02/22; There has not been any treatment or conservative therapy.; shortness of breathe and pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	NOTHING FURTHER; This study is being ordered for Vascular Disease.; 12/2021; There has been treatment or conservative therapy.; SHORTNESS OF BREATH; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	PAST MEDICAL HISTORT OF HYPERTENSION; DIABETES; PT STATED THAT HE WAS TOLD BY HIS PCP THAT HE HAD A HEART MURMUR; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; PROGRESSIVE SHORTNESS OF BREATH WITH MINIMAL EXERTION; CHEST PAIN AND CHEST TIGHTNESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	PAST MEDICAL HISTORY OF BREAST CANCER; HYPERTENSION; FAMILY HISTORY OF HEART DISEASE; NOT A CANDIDATE FOR TREADMILL STRESS TEST DUE TO JOINT PAIN; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; RIGHT SIDED CHEST PAIN; SHORTNESS OF BREATH; FATIGUE; LOWER EXT EDEMA; PALPITATIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Patient has ST-T changes, overweight and smokes, chest pain at Rest, Irregular heartbeat; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/14/22; There has been treatment or conservative therapy.; Hypertension chest pain, history of cardiac death; cardio, exercise and diet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	PT HAS ANGINA, MURMUR ON EXAM, ESSENTIAL HYPERTENSION, ABNORMAL EKG, AND HYPERLIPIDEMIA; This study is being ordered for Vascular Disease.; PT CAME IN FOR NEW PT APPT ON 3/29/22. NEW SYMPTOMS; There has not been any treatment or conservative therapy.; DYPNSEA ON EXERTION, MARKED EFFORT INTOLERANCE, SOME DIZZINESS AND LIGHTHEADEDNESS;PT HAS ABN EKG, MURMUR AND BRUIT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	SOB, CHEST PAIN; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 4/28/22; There has not been any treatment or conservative therapy.; PT C/O SOB, CHEST PAIN AND HYPERTENSION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered as a post operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Cardiology; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was ST wave changes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered as a post operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1, 2 or 3 years since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been more than 3 years since the last Transthoracic Echocardiogram (TTE) was completed; The patient is asymptomatic	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Moderate stenosis or moderate regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1, 2 or 3 years since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Severe stenosis or severe regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1 year since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was Rhythm abnormalities	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; Something other than Myocardial Perfusion Imaging, Exercise Treadmill Testing, Stress Echocardiography, or EKG has been completed	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; The ordering provider's specialty is NOT Rheumatology.; This study is being ordered for none of the above or don't know.; The member has NOT tested positive for Coronavirus (Covid 19)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; This study is being ordered for symptoms of a heart problem	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient does not have a history of a recent heart attack or hypertensive heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Known or suspected left ventricular disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; There has been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; There has NOT been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	7	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient has shortness of breath; Shortness of breath is not related to any of the listed indications.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This study is NOT being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of cardiac arrhythmias; This study is NOT being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; It is unknown if there is clinical symptoms supporting a suspicion of structural heart disease.; This is NOT a request for follow up of a known murmur.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; The murmur is NOT grade III (3) or greater.; There are NOT clinical symptoms supporting a suspicion of structural heart disease.; This is NOT a request for follow up of a known murmur.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; The patient has suspected prolapsed mitral valve.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual re-evaluation of artificial heart valves.; It has been at least 12 months since the last echocardiogram was performed.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 7-9 months since the last echocardiogram.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 12 - 23 months or more since the last echocardiogram.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 24 months or more since the last echocardiogram.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an evaluation of new or changing symptoms of valve disease.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of artificial heart valves.	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is NOT for prolapsed mitral valve, suspected valve disease, new or changing symptoms of valve disease, annual review of known valve disease, initial evaluation of artificial heart valves or annual re-eval of artificial heart valves.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; It is unknown if the patient has a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 20 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; Follow up for known pulmonary hypertension best describes the reason for ordering this study.; The last Transthoracic Echocardiogram was Within the last year	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; It is not known if there is known valvular heart disease.; Pre-existing murmur best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; The atrial fibrillation and/or atrial flutter is pre-existing.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; The last Transthoracic Echocardiogram was more than 6 months ago.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The atrial fibrillation and/or atrial flutter is new onset.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; SHORTNESS OF BREATH WITH EXERTION; HEART FLUTTERING/ BIL EDEMA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; 4 months ago;Jan 2022; There has not been any treatment or conservative therapy.; 12/22/21 Pt having difficulty with sleep after having car broken into. Last night she felt a heaviness on her chest and noticed her heart was racing. States her heart rate has stayed elevated today on and off;;5/12/2022 About 4 months ago she has an epi; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; 6/17/2022; There has been treatment or conservative therapy.; chest pain, afib, fatigue and shortness of breath; started the patient on medications, Low dose Aspirin , Sotalol, Carvedilol; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; UNKNOWN; There has not been any treatment or conservative therapy.; CHEST PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for Vascular Disease.; 1/2021; There has been treatment or conservative therapy.; Chest pain and shortness of breathe.; Medication.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	will fax additional clinicals; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 06/01/2022; There has not been any treatment or conservative therapy.; Chest Pain/Fatigue Diaphoresis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	Radiology Services Denied Not Medically Necessary	.She underwent aortic valve replacement, aortic root replacement, surgical maze procedure along with left atrial appendage clipping by Dr. Bauer. follow up evaluation of these procedures.; This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is NOT for suspected acute aortic pathology, pre-op of mitral valve regurgitation, infective endocarditis, left atrial thrombus, radiofrequency ablation procedure, fever with intracardiac device or completed NON diagnostic TTE.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested after a completed NON diagnostic transthoracic echocardiogram.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report 93350 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed,	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of atrial fibrillation or flutter to determine the presence or absence of left atrial thrombus or evaluate for radiofrequency ablation procedure.; The patient is 18 years of age or older.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report;	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	No information Given; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 02/22; There has not been any treatment or conservative therapy.; shortness of breathe and pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	SOB, long family history, history of multiple surgeries; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 4/20/2022; There has not been any treatment or conservative therapy.; chest pain, dyspnea and murmur; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; Assessment of risk for a patient without symptoms or history of ischemic/coronary artery disease best describes the patients clinical presentation.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	9 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is a Medicare member.; None of the above apply to this patient	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known left bundle branch block as documented on an EKG and has been interpreted by a Cardiologist; The last Stress Echocardiogram or Myocardial Perfusion Imaging procedure was performed less than 12 months	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known revascularization by insertion of a stent; The vessel that had the stent inserted is Left Anterior Descending	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has None of the above	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; The member does not have known or suspected coronary artery disease	7 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; Other than listed above best describes the patients clinical presentation.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; Routine follow up of patient with previous history of ischemic/ coronary artery disease without new or changing symptoms best describes the patients clinical presentation.	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	2 2022 2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Cardiology	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; To evaluate the heart prior to non-cardiac surgery.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		2/2018; There has been treatment or conservative therapy.; Muscle spasms, neck pain and migraines; Prescription meds, cold packs, decrease in activity, home exercises; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material		2/2018; There has been treatment or conservative therapy.; Muscle spasms, neck pain and migraines; Prescription meds, cold packs, decrease in activity, home exercises; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material		This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material		This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; It is not known if there is a suspicion of tendon, ligament, rotator cuff injury, or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; It is not known if there is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Recent (in the past month) head trauma with neurologic symptoms/findings best describes the reason that I have requested this test.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	PLEASE SEE ATTACHED; MORE THAN 6 YEAR AGO.; There has been treatment or conservative therapy.; PAIN, RADICULAR PAIN, ACHING, STABBING, RADIATING DOWN LEFT ARM. LUMBAR PAIN IS DESCRIBED AS CONSTANT ACHE. ;NOTHING RELIEVES THE PAIN.; NSAIDS, CHIROPRACTIC CARE, OSTEOPATHIC MEDICINE, PHYSICAL THERAPY AND SURGERY; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	PLEASE SEE ATTACHED; MORE THAN 6 YEAR AGO.; There has been treatment or conservative therapy.; PAIN, RADICULAR PAIN, ACHING, STABBING, RADIATING DOWN LEFT ARM. LUMBAR PAIN IS DESCRIBED AS CONSTANT ACHE. ;NOTHING RELIEVES THE PAIN.; NSAIDS, CHIROPRACTIC CARE, OSTEOPATHIC MEDICINE, PHYSICAL THERAPY AND SURGERY; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Chiropractic Medicine	Disapproval	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This is a request for CT Angiography of the Abdomen and Pelvis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)		S/P FISTULECTOMY; This is a request for a Pelvis MRI.; No, this is not a preoperative study.; The study is being ordered for suspicion of pelvic inflammatory disease or abscess.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)		This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Colon & Rectal Surgery	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Dermatology	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)		This study is being ordered for a known tumor.; The ordering physician is an oncologist, surgeon, pulmonologist, or cardiologist.; This study is being ordered for follow-up.; The patient is undergoing active treatment for cancer.; This is a request for a chest MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material		; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material		see clinicals; This study is being ordered for trauma or injury.; see clinicals; There has been treatment or conservative therapy.; see clinicals; see clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	; ; There has been treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 15 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for something other than arthritis, slipped femoral capital epiphysis, bilateral hip avascular necrosis, osteomyelitis or tail bone pain or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is an orthopedist.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	see clinicals; This study is being ordered for trauma or injury.; see clinicals; There has been treatment or conservative therapy.; see clinicals; see clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is not for hip pain.; The study is for a mass, tumor or cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary; ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	see clinicals; see clinicals; There has been treatment or conservative therapy.; see clinicals; see clinicals; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	see clinicals; see clinicals; There has been treatment or conservative therapy.; see clinicals; see clinicals; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	localize pain to the left sided low back and to the left buttock area which does not radiate to the groin or down the left leg her physical therapist has done a lot of dry needling in the past which did not help; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for tail bone pain or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Doctors and Rehabilitation	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; This study is being ordered for something other than recent injury, planned surgery, mass, tumor or cancer, joint infection/inflammation, post operative evaluation, or aseptic necrosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70486	Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70490	Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70490	Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The study is being ordered for recent trauma or other injury.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; Unknown; There has been treatment or conservative therapy.; Ralph E Hulsey is a 59 y.o. male who presents to clinic with complaints of persistent pain in upper back with radiation into left shoulder. Pain made worse with movement. Sharp, stabbing. Significant history of vertebral laminectomy, fusion of upper th; Back surgery, gabapentin, meloxicam; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	; Unknown; There has been treatment or conservative therapy.; Ralph E Hulsey is a 59 y.o. male who presents to clinic with complaints of persistent pain in upper back with radiation into left shoulder. Pain made worse with movement. Sharp, stabbing. Significant history of vertebral laminectomy, fusion of upper th; Back surgery, gabapentin, meloxicam; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; It is unknown if this procedure is being ordered for acute or chronic back pain	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	73200 Computed tomography, upper extremity; without contrast material	There is a history of upper extremity joint or long bone trauma or injury.; This is a request for an Arm CT Non Joint; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; Pain regimen:;- ibuprofen, tylenol. ;- Hydrocodone 10 mg x 30 q3 months	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	73700 Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is suspicion of lower extremity bone or joint infection.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Abnormal Varus or Valgus stress testing was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with an Ace bandage; The ordering MDs specialty is NOT Orthopedics.	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for acute pain.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms; The patient has 1 or less cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is not know	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; Changing symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is for a PET Scan with an Other Tracer	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of Pericardial Disease.; This is for the initial evaluation of a pericardial disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; There has NOT been a change in clinical status since the last echocardiogram.; This request is NOT for initial evaluation of a murmur.; This is a request for follow up of a known murmur.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; There are NOT clinical symptoms supporting a suspicion of structural heart disease.; This is NOT a request for follow up of a known murmur.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Approval	93350 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and/or cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report;		This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are NO recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness; This is NOT a follow up request for a known hemorrhage/hematoma or vascular abnormality	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have a sudden severe, chronic or recurring or a thunderclap headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; It is unknown if the patient has a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	MRI lumbar spine is being requested to further evaluate the patient; unknown; It is not known if there has been any treatment or conservative therapy.; back pain, neck, arm leg pain.chronic pain; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; MRI of right hip (pelvis) the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient.; It is not known if there has been any treatment or conservative therapy.; MRI of right hip (pelvis) the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patients;persistent pain and symptoms. Findings from this study will be incorporated, in conjunction with objective;findings, into the decision process in formulating a treatment plan for this patient.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; Chronic pain; medications, S/P LESI #2 with minimal relief of symptoms. Patient reports pain is exacerbated in lower back and in his hips;and pelvis.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI lumbar spine is being requested to further evaluate the patient; unknown; It is not known if there has been any treatment or conservative therapy.; back pain, neck, arm leg pain.chronic pain; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	7 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72192 Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	Pt has a suspected benign tumor on the left hip. There is also showing something on the right hip.; This study is being ordered because of a suspicious mass/ tumor.; "The patient has NOT had a pelvic ultrasound, barium, CT, or MR study."; This is a request for a Pelvis CT.; There are NO documented physical findings (painless hematuria, etc.) consistent with an abdominal mass or tumor.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72192 Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for known tumor, cancer, mass, or rule-out metastasis.; "The ordering physician is NOT an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This study is being ordered for initial staging.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patients;persistent pain and symptoms. Findings from this study will be incorporated, in conjunction with objective;findings, into the decision process in formulating a treatment plan for this patient.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; Chronic pain; medications, S/P LESI #2 with minimal relief of symptoms. Patient reports pain is exacerbated in lower back and in his hips;and pelvis.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	MRI of sacrum/coccyx is being requested to further evaluate the patient?s persistent pain and symptoms.;Findings from this study will be incorporated, in conjunction with objective findings, into the decision process in;formulating a treatment plan for ; This is a request for a Pelvis MRI.; The study is being ordered for something other than arthritis, slipped femoral capital epiphysis, bilateral hip avascular necrosis, osteomyelitis or tail bone pain or injury.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	pt can't find relief w/pain medication; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/30/2022; There has not been any treatment or conservative therapy.; sharp pain and tingling.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; The pain is not from a recent injury, old injury, chronic pain or a mass.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	pt can't find relief w/pain medication; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/30/2022; There has not been any treatment or conservative therapy.; sharp pain and tingling.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; She complains of exacerbation of Shoulder Pain for more than four weeks, not being managed with activity modification, home exercise program; The patient received medication other than joint injections(s) or oral analgesics.; over the counter NSAIDs;butalbital-acetaminophen-caffeine 50 mg-325 mg-40 mg tablet;omeprazole 40 mg capsule,delayed release;topiramate 200 mg tablet;metoprolol succinate ER 25 mg tablet,extended release 24 hr;aspirin 81 mg tablet,delayed release;Na	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Progressively worsening symptoms. now unable to bear weight.; This study is being ordered for trauma or injury.; 04/15/2022; There has been treatment or conservative therapy.; Pain in right hip and right thigh; unable to bear weight.; Tylenol, Ibuprofen, cyclobenzaprine.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	She describes the pattern of pain as constant with intermittent flare ups. Patient says, at its worse pain is 10 /10, at;its least it is 5/10, on an average about 5/10, and current pain level is 5/10.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; complains of exacerbation of Multiple Joint Pain for more than four weeks; There has been treatment or conservative therapy.; restrictions in;activities, mood changes and difficulty in sleep; home exercise program, over the counter NSAIDs and current pain medication(s) regimen; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is not being ordered for foot pain, known dislocation, infection,suspected fracture, known fracture, pre op, post op or a known/palpated mass.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Baker's cyst (swelling in the back of the knee) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Blood or abnormal fluid in the knee joint was noted as an indication for knee imaging	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is a pre-operative study for planned surgery.; Non Joint is being requested.; A Total Hip or Knee Arthroplasty is NOT being planned nor has one already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; MRI of right hip (pelvis) the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient.; It is not known if there has been any treatment or conservative therapy.; MRI of right hip (pelvis) the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patients;persistent pain and symptoms. Findings from this study will be incorporated, in conjunction with objective;findings, into the decision process in formulating a treatment plan for this patient.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; Chronic pain; medications, S/P LESI #2 with minimal relief of symptoms. Patient reports pain is exacerbated in lower back and in his hips;and pelvis.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Progressively worsening symptoms. now unable to bear weight.; This study is being ordered for trauma or injury.; 04/15/2022; There has been treatment or conservative therapy.; Pain in right hip and right thigh; unable to bear weight.; Tylenol, Ibuprofen, cyclobenzaprine.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are NO abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; There are no findings that confirm hepatitis C.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	78451	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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Reports 0/10 chest pain at this time. She says she has had pain on and off for 3-4 days, but the nitro takes it away. She took Nitro PTA. Also reports feeling near syncopal episodes as well the last 3-4 days. No high risk factors, complaints or symptoms ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	78451	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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; It is unknown if the symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; The ordering provider's specialty is NOT Rheumatology.; This study is being ordered for none of the above or don't know.; The member has NOT tested positive for Coronavirus (Covid 19)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Emergency Medicine	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is NOT a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This is a request for an Internal Auditory Canal MRI.; There is a suspected Acoustic Neuroma or tumor of the inner or middle ear.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has vision changes.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has fatigue or malaise	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	71250 Computed tomography, thorax; without contrast material		Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Thyroid Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Approval	93350 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;		This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; It is not known if the neck mass has been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Diverticulitis.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are NO abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; There are no findings that confirm hepatitis C.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Endocrinology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		Unknown; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	71250 Computed tomography, thorax; without contrast material		4/8/2021; It is not known if there has been any treatment or conservative therapy.; Will fax clinicals, if required.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	71250 Computed tomography, thorax; without contrast material		05-03-2022; There has not been any treatment or conservative therapy.; dysphagia, GERD, mass in gastroesophageal junction, erythema in the antrum compatible with gastritis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	71250	Computed tomography, thorax; without contrast material	05/03/2022; There has not been any treatment or conservative therapy.; mass in the rectosigmoid junction; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	71250	Computed tomography, thorax; without contrast material	About 3 months ago; It is not known if there has been any treatment or conservative therapy.; Abdominal Pain, Chest Pain, Chronic Cough, Diarrhea, Abdominal Distention; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	71250	Computed tomography, thorax; without contrast material	Unknown; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72192	Computed tomography, pelvis; without contrast material	The patient is not undergoing active treatment for cancer; This study is being ordered for known tumor, cancer, mass, or rule-out metastasis.; "The ordering physician is an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This study is not being ordered for initial staging.; The patient is presenting new signs (e.g. lab findings or imaging) or symptoms.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72192	Computed tomography, pelvis; without contrast material	This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 11/30/2021 enter date of initial onset here - or Type In Unknown If No Info Given; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	BOWEL OBSTRUCTION, CDIFF; This study is being ordered for Inflammatory/ Infectious Disease.; HE HAS HAD HX OF CHRON'S; There has been treatment or conservative therapy.; DIARRHEA; HUMIRA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Inflammatory/ Infectious Disease.; 11/01/2021; There has not been any treatment or conservative therapy.; Abdominal pain Diarrheas' weight loss abnormal colonoscopy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This study is being ordered for Inflammatory/ Infectious Disease.; crohn's disease; It is not known if there has been any treatment or conservative therapy.; symptoms of crohn's disease; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This study is being ordered for Inflammatory/ Infectious Disease.; Inflammatory bowel disease, colitis; There has been treatment or conservative therapy.; loss of appetite, recurrent vomiting, dehydration, fever, dehydration, dermatitis, elevated erythrocyte sedimentation rate, gastroduodenitis , inflammatory bowel disease; Medication, labs, doctor visits and close care, xrays of abdomen, a complete colectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ABDOMINAL PAIN; It is not known if there has been any treatment or conservative therapy.; ABDOMINAL PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for post-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study being ordered for a palpable, observed or imaged upper abdominal mass.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; Yes, this is a request for follow up to a known tumor or abdominal cancer.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Diverticulitis.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for organ enlargement.; The liver is enlarged.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member. 4/8/2021; It is not known if there has been any treatment or conservative therapy.; Will fax clinicals, if required.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	05-03-2022; There has not been any treatment or conservative therapy.; dysphagia, GERD, mass in gastroesophageal junction, erythema in the antrum compatible with gastritis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	05/03/2022; There has not been any treatment or conservative therapy.; mass in the rectosigmoid junction; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	About 3 months ago; It is not known if there has been any treatment or conservative therapy.; Abdominal Pain, Chest Pain, Chronic Cough, Diarrhea, Abdominal Distention; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; It is not known if this is the first visit for this complaint.; It is unknown if there has been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; It is not known if the patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; It is not known if this study is being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; The patient has Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; It is not known if the patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient has Crohn's Disease.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Iron Deficiency Anemia; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); MAria B @ OP requested to fax in info; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; It is not known if the patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed within the past 10 months.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	6 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	5 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was abnormal.; The ultrasound showed something other than Gall Stones, Kidney/Renal cyst, Aneym or a Pelvis Mass.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has NOT been completed.; The patient had an endoscopy.; The endoscopy was normal.; Yes this is a request for a Diagnostic CT	5 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; It is unknown if the patient had an Ultrasound.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	8 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 11/30/2021 enter date of initial onset here - or Type In Unknown If No Info Given; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	BOWEL OBSTRUCTION, CDIFF; This study is being ordered for Inflammatory/ Infectious Disease.; HE HAS HAD HX OF CHRON'S; There has been treatment or conservative therapy.; DIARRHEA; HUMIRA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Crohns Disease; This study is being ordered for Inflammatory/ Infectious Disease.; 2019; There has been treatment or conservative therapy.; new onset of intermittent left;upper quadrant abdominal pain, as well as black tarry stools; Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Inflammatory/ Infectious Disease.; 11/01/2021; There has not been any treatment or conservative therapy.; Abdominal pain Diarrheas' weight loss abnormal colonoscopy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	One Year Follow up Pancreatic Mass Protocol; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2020; There has been treatment or conservative therapy.; Pancreatic Cyst;Frequent Urgency;Loose Stools;Abdominal Cramping;Nausea and Vomiting;LLQ discomfort; Prescription Medications, Dietary Measures, Weight loss and exercise and avoidance of NSAIDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for follow-up trauma.; The ordering physician is a gastroenterologist or surgeon.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for known or suspected infection.; There are NO physical findings or abnormal blood work consistent with peritonitis, pancreatitis or appendicitis.; There is active or clinical findings of ulcerative colitis, bowel inflammation or diverticulitis.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for known or suspected infection.; There are physical findings or abnormal blood work consistent with pancreatitis.; An abnormal amylase or lipase was NOT noted.	2 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for pre-operative evaluation.; Surgery is not planned for within 30 days.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for pre-operative evaluation.; Surgery is planned for within 30 days.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	2 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if there is suspicion of metastasis.	4 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	3 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	7 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; This study is NOT being ordered to evaluate an undescended testicle in a male.	2 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	6 2022 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This study is being ordered for Inflammatory/ Infectious Disease.; crohn's disease; It is not known if there has been any treatment or conservative therapy.; symptoms of crohn's disease; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This study is being ordered for Inflammatory/ Infectious Disease.; Inflammatory bowel disease, colitis; There has been treatment or conservative therapy.; loss of appetize, recurrent vomiting, dehydration, fever, dehydration, dermatitis, elevated erythrocyte sedimentaion rate, gastroduodenitis , inflammatory bowel disease; Medication, labs, doctor visits and close care, xrays of abdomen, a complete colectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ABDOMINAL PAIN; It is not known if there has been any treatment or conservative therapy.; ABDOMINAL PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74185 Magnetic resonance angiography, abdomen, with or without contrast material(s)	This is a request for a MR Angiogram of the abdomen.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74261 Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	This patient has a medical problem that makes him/her unsuitable for conventional colonoscopy.; This CT Colonoscopy is being ordered for diagnostic purposes; The member had colon screening studies completed prior to this request	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	74261 Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	unknown; This CT Colonoscopy is being ordered for diagnostic purposes; It is unknown if the member had any colon screening studies completed prior to this request	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an evaluation of new or changing symptoms of valve disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	Crohns Disease; This study is being ordered for Inflammatory/ Infectious Disease.; 2019; There has been treatment or conservative therapy.; new onset of intermittent left;upper quadrant abdominal pain, as well as black tarry stools; Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	One Year Follow up Pancreatic Mass Protocol; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2020; There has been treatment or conservative therapy.; Pancreatic Cyst;Frequent Urgency;Loose Stools;Abdominal Cramping;Nausea and Vomiting;LLQ discomfort; Prescription Medications, Dietary Measures, Weight loss and exercise and avoidance of NSAIDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has not undergone an unsuccessful ERCP.; The patient does not have an altered biliary tract anatomy that precludes ERCP.; The patient does not require evaluation for a congenital defect of the pancreatic or biliary tract.; The MRCP will be used to identify a pancreatic or biliary system obstruction that cannot be opened by ERCP.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has not undergone an unsuccessful ERCP.; The patient does not have an altered biliary tract anatomy that precludes ERCP.; The patient requires evaluation for a congenital defect of the pancreatic or biliary tract.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has not undergone an unsuccessful ERCP.; The patient has an altered biliary tract anatomy that precludes ERCP.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has NOT been completed; Ths Interstitial Lung Disease is suspected	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; The patient had an abnormal finding on physical exam related to the suspicion of cancer.; This is a request for a Chest CT.; This study is beign requested for suspected cancer or tumor.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee immobilizer; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study is ordered for something other than staging of a known tumor (not) prostate, known prostate CA with PSA&gt; 10, abdominal mass, Retroperitoneal mass or new symptoms including hematuria with known CA or tumor.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient has new lab results or other imaging studies including doppler or x-ray (plain film) findings.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Diverticulitis.; Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for organ enlargement.; The liver is enlarged.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Ty04pe In Unknown If No Info Given 04/12/; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; It is not known if the patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; It is not known if this study is being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; The patient has Diverticulitis.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); see fax; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); iron;deficiency anemia. are required to insert a reason here; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; It is not known if this is the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; It is unknown if the patient had an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if there is suspicion of metastasis.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74261 Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Ty04pe In Unknown If No Info Given 04/12/; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74261 Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	Radiology Services Denied Not Medically Necessary	Will Fax additional clinicals; This CT Colonoscopy is being ordered for diagnostic purposes; The member has not had any colon screening studies completed prior to this request	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	74263 Computed tomographic (CT) colonography, screening, including image postprocessing	Radiology Services Denied Not Medically Necessary	This is a request for CT Colonoscopy for screening purposes only.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	cardiac clearance for non-cardiac surgery. Patient has history of chest pain and is obese.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	patient evaluation for a liver transplant, cardiac clearance.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	Radiology Services Denied Not Medically Necessary	; This is a request for MRCP.; There is no reason why the patient cannot have an ERCP.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Gastroenterology	Disapproval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	Radiology Services Denied Not Medically Necessary	mass of pancreas, last imaging 12/18/2020 due to no insurance. Mother and Grandmother had colon cancer.; This is a request for MRCP.; There is no reason why the patient cannot have an ERCP.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material		; This study is being ordered for trauma or injury.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material		Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/19/22; There has not been any treatment or conservative therapy.; head and back pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material		n/a; This study is being ordered for trauma or injury.; 5/24/2022; There has not been any treatment or conservative therapy.; neck pain and pain at base of skull, acute headaches, cervical spine pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	22	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are NO recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness; This is a follow up request for a known hemorrhage/hematoma or vascular abnormality	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are NO recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness; This is NOT a follow up request for a known hemorrhage/hematoma or vascular abnormality	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	16	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	9	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	5	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	3	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are NO documented neurologic findings suggesting a primary brain tumor.; Known or suspected tumor best describes the reason that I have requested this test.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a suspected tumor outside the brain.; Known or suspected tumor best describes the reason that I have requested this test.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	6	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	7	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected inflammatory disease best describes the reason that I have requested this test.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	CONCERN FOR SCHWANNOMA; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/16/22; There has been treatment or conservative therapy.; PULSATILE TINNIUS OF RIGHT EAR, CAROTID STENOSIS, HEARING LOSS IN RIGHT EAR, ANTIBIOTICS AMOXICILLIAN X10 DAYS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486 Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	11	Apr-2022	Jun-2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is suspicion of bone infection, [osteomyelitis].fct"; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is suspicion of neoplasm, tumor or metastasis.fct"; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	Accute recurrent Sialoadenitis; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	Has allergies and significant nasal congestion. Has been using Afrin for several weeks. Congestion worsening ;Has tried allegra, zyrtec, flonase without relief; This study is being ordered for Inflammatory/ Infectious Disease.; 04/13/2022; It is not known if there has been any treatment or conservative therapy.; Nose: Congestion present. Comments: bilaterally enlarged nasal turbinates ;Patient complains of a headache; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	r/o any underlying mass or fractures to left foot, r/o abscess in sinus; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy; chronic sinusitis and left foot pain; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for follow-up to trauma.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70486	Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is not being ordered for trauma, tumor, sinusitis, osteomyelitis, pre operative or a post operative evaluation.; Yes this is a request for a Diagnostic CT	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was done.; The patient has NOT been diagnosed with cancer.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	15	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has been examined twice at least 30 days apart.; It is unknown if the lump got smaller.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is NOT a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70490	Computed tomography, soft tissue neck; without contrast material	ULTRASOUND SHOWS A 20 MM CERVICAL LYMPH NODE, WORRISOME FOR METASTATIC DZ. RADIOLOGIST RECOMMENDED CT CHEST AND CT NECK; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	CTA head and neck due to head pain with pupillary change rt pupil, vascular prominence left head; along with Coronary arteriosclerosis.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Cognition and Memory: He exhibits impaired recent memory. ;1.21.2022; It is not known if there has been any treatment or conservative therapy.; New daily persistent headache;Memory changes;Pupil irregular of right eye; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the brain.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	CTA head and neck due to head pain with pupillary change rt pupil, vascular prominence left head; along with Coronary arteriosclerosis.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Cognition and Memory: He exhibits impaired recent memory. ;1.21.2022; It is not known if there has been any treatment or conservative therapy.; New daily persistent headache;Memory changes;Pupil irregular of right eye; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for suspicion of neoplasm, tumor or metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for the evaluation of lymphadenopathy or mass	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for trauma or injury of the orbit, face or neck soft tissue	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Left eye optic neuritis getting much worse per eye doc. ;getting in to specialist as well Dr. Jennifer Doyle;they are concerned with other auto immune disease being part of it;getting lab work; It is unknown if there is a suspicion of an infection or abscess.; This examination is NOT being requested to evaluate lymphadenopathy or mass.; There is not a suspicion of a bone infection (osteomyelitis); It is unknown if there is a suspicion of an orbit or face neoplasm, tumor, or metastasis.; This is a request for an Orbit MRI.; There is not a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	n/a; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 10/26/2021; There has been treatment or conservative therapy.; headache, chronic migraines, blurry vision; PT, Medications, and home exercises.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	PT CANT SEE OUT OF RT EYE, RULE OUT MASS IN BRAIN OR OPTICAL CHIASM.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	This is a request for a Face MRI.; There is a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	CONCERN FOR SCHWANNOMA; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/16/22; There has been treatment or conservative therapy.; PULSATILE TINNIUS OF RIGHT EAR, CAROTID STENOSIS, HEARING LOSS IN RIGHT EAR; ANTIBIOTICS AMOXICILLIAN X10 DAYS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	NEUROLOGIC EXAM ADMITS DIZZINESS, HEADACHES, PAIN, DENIES STROKE, PREVIOUSLY EXPERIENCE IN FACE AND DOWN RT ARM OF TINGLING/NUMBNESS. ANXIETY, DIFFICULT SLEEPING, ADMITS STRESSORS. MUSCLE ACHES, JOINT STIFFNESS, HX OF GOUT. ADMITS RINGING IN EARS, EAR PRO; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	NONE; This study is being ordered for a neurological disorder.; 3/9/2022; There has been treatment or conservative therapy.; VISION CHANGES; SHE HAS SEEN AN EYE DR AND HAS BEEN TOLD SHE HAS HAD A STROKE BEFORE.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	Patients episodes have been worked up in the past in the ER and outpatient without specific diagnosis or cause. His episodes are getting more frequent.; This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; Aphasia, weakness, diaphoresis, altered level of consciousness; Patient has had CT of head without contrast without diagnosis, he has done blood sugar monitoring, increased fluids and rest without improvement. Episodes seem to be worsening.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	PT HAD COMPLETE VISION LOSS WHILE DRIVING.; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	The patient had a stroke in the last month.; It is unknown if there is a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has been a recent (less than 2 week) neck or carotid artery ultrasound.; The ultrasound showed stenosis or narrowing of the artery.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is an immediate family history of aneurysm.; This is a request for a Brain MRA.	5	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has been a stroke or TIA within the past 2 weeks.; This is a request for a Brain MRA.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is not an immediate family history of aneurysm.; The patient has a known aneurysm.; This is a request for a Brain MRA.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	CONCERN FOR SCHWANNOMA; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/16/22; There has been treatment or conservative therapy.; PULSATILE TINNIUS OF RIGHT EAR, CAROTID STENOSIS, HEARING LOSS IN RIGHT EAR; ANTIBIOTICS AMOXICILLIAN X10 DAYS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	Pt c/o left side of face swelling esp around eye. has noted visual changes of the left eye and has noted more ha. Hx of carotid artery aneurysm.; This is a request for a Neck MR Angiography.; The patient has vision changes.; The patient had an onset of neurologic symptoms within the last two weeks.; The patient has NOT had an ultrasound (doppler) of the neck or carotid arteries.; The patient had carotid (neck) artery surgery.; This is NOT the first imaging after surgery.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	The patient had a stroke in the last month.; It is unknown if there is a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has been a recent (less than 2 week) neck or carotid artery ultrasound.; The ultrasound showed stenosis or narrowing of the artery.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other not listed	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	01/25/2022; There has not been any treatment or conservative therapy.; Patient reports falling a few times recently, and since the fall he has had right sided facial numbness, he also states that he intermittently has periods of dizziness. Denies currently having headache, chest pain, dizziness, difficulty breathing, facial; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	12/01/21; There has been treatment or conservative therapy.; neck pain and facial paresthesia; Physical therapy; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 2/21/2022; There has not been any treatment or conservative therapy.; headaches, chronic neck pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 4/5/2022; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	n/a; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 10/26/2021; There has been treatment or conservative therapy.; headache, chronic migraines, blurry vision; PT, Medications, and home exercises.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	no info given; This study is being ordered for a neurological disorder.; January 2022; There has been treatment or conservative therapy.; Pain in right jaw and ear; Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	NONE; This study is being ordered for a neurological disorder.; 3/9/2022; There has been treatment or conservative therapy.; VISION CHANGES; SHE HAS SEEN AN EYE DR AND HAS BEEN TOLD SHE HAS HAD A STROKE BEFORE.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient has multiple sclerosis and is having pain and weakness in her legs. She has not had a MRI for evaluation in 8-10 years.; This study is being ordered for a neurological disorder.; 1989; There has been treatment or conservative therapy.; Patient has multiple sclerosis and has been having an increase in knee/leg pain and weakness; Patient has multiple sclerosis and has not been taking medication for this. She has in the past.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient reports majority of her pain is in right leg. Patient has a tremor to the right leg that comes and goes. Patient has had weakness and unstable gait for about 4-6 months. Patients blood pressure has been going up and down. Patient went to Baylor du; This study is being ordered for a neurological disorder.; November 2021; There has been treatment or conservative therapy.; Pt. having tremors, pain to right leg, trouble walking, weight loss, was dx'd with Parkinsons in November; has weakness, unstable gait, is hyperreflexic.; Medications, first time seen in this office; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patients episodes have been worked up in the past in the ER and outpatient without specific diagnosis or cause. His episodes are getting more frequent.; This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; Aphasia, weakness, diaphoresis, altered level of consciousness; Patient has had CT of head without contrast without diagnosis, he has done blood sugar monitoring, increased fluids and rest without improvement. Episodes seem to be worsening.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	PT CANT SEE OUT OF RT EYE, RULE OUT MASS IN BRAIN OR OPTICAL CHIASM.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI; There is a suspected Acoustic Neuroma or tumor of the inner or middle ear.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is not a suspected Acoustic Neuroma or tumor of the inner or middle ear.; There is not a suspected cholesteatoma of the ear.; The patient has not had a recent brain CT or MRI within the last 90 days.; There are no neurologic symptoms or deficits such as one-sided weakness, speech impairments, vision defects or sudden onset of severe dizziness.; This is not a pre-operative evaluation for a known tumor of the middle or inner ear.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	8	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	9	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Chronic headache, longer than one month describes the headache's character.	5	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; New onset within the past month describes the headache's character.	6	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Worst headache of the patient's life with sudden onset in the past 5 days describes the headache's character.; This is NOT a Medicare member.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a memory assessment for cognitive impairment completed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected infection best describes the reason that I have requested this test.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected TIA (stroke) best describes the reason that I have requested this test.; There are documented localizing neurologic findings.	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Recent (in the past month) head trauma with neurologic symptoms/findings best describes the reason that I have requested this test.; This is NOT a Medicare member.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have a sudden severe, chronic or recurring or a thunderclap headache.	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	27	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	64	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	65	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a sudden and severe headache.; It is unknown if the patient had a recent onset (within the last 3 months) of neurologic symptoms.	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a sudden and severe headache.; The patient has NOT had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has the inability to speak.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has vision changes.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).; It is unknown if the patient had a Brain MRI in the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).; It is unknown if the patient had a Brain MRI in the last 12 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 13 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a congenital abnormality.; Arnold-Chiari Malformation describes the congenital anomaly	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Bell's Palsy.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 16 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has fatigue or malaise	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient had a memory assessment for cognitive impairment completed; The patient has normal results of B12, TSH and other metabolic labs	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment; The patient had labs completed, including B12, TSH (Thyroid-stimulating hormone), CBC (Complete Blood Count), and CMP (Comprehensive Metabolic Panel)	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a memory assessment for cognitive impairment completed	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is NOT a new/initial evaluation	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The caller doesn't know if the patient had an audiogram.; It is unknown why this study is being ordered.; The patient has hearing loss.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.; The patient has NOT had a Brain MRI in the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.; The patient has NOT had a Brain MRI in the last 12 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack); The patient has NOT had a Brain MRI in the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack); The patient has NOT had a Brain MRI in the last 12 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has the inability to speak.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; It is unknown if there has been a recent assessment of the patient's visual acuity.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; There has been a recent assessment of the patient's visual acuity.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed more than 10 months ago.	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed more than 12 months ago	3	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Parkinson's disease.; The neurologic symptoms include something other than worsening Parkinson symptoms, dizziness, vision changes, one sided arm or leg weakness, or the inability to speak.; This study is being ordered for new neurological symptoms.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; It is unknown if there has been a change in seizure pattern or a new seizure.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	18	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has NOT been a change in seizure pattern or a new seizure.	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	6	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	unknown; There has not been any treatment or conservative therapy.; Significant arm and leg weakness; This study is being ordered for Other not listed	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	unknown; This study is being ordered for a neurological disorder.; 2020; It is not known if there has been any treatment or conservative therapy.; Chronic Pain; Spasms; blurred vision; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250 Computed tomography, thorax; without contrast material	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250 Computed tomography, thorax; without contrast material	; There has been treatment or conservative therapy.; ; CHEST AND ABDOMINAL X RAY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Abnormal finding on physical examination was relevant in the diagnosis or suspicion of inflammatory lung disease; This study is being requested for known or suspected inflammatory disease such as sarcoidosis, pneumoconiosis, asbestosis, silicosis; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; It is unknown what led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema); Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; The patient had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; It is unknown if the patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; Yes this is a request for a Diagnostic CT	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This study is being requested for 'none of the above'; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	"There IS evidence of a lung, mediastinal or chest mass noted within the last 30 days."; They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	3/29/2022; There has been treatment or conservative therapy.; The member has a large amount of weight loss.; They did blood work, x-rays and referred the member to a specialist.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	5-6-2021; There has not been any treatment or conservative therapy.; right lung infection possible neoplasm. Finished antibiotics and still has nasty cough and worried about a mass on her right lung, SOB, fatigue; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	5/10/2022; There has been treatment or conservative therapy.; severe weight loss abdominal pain; Physical Therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	05/17/2022; There has not been any treatment or conservative therapy.; Weight loss, severe cough, bronchitis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient had a Chest x-ray in the past 2 weeks.; This study is being ordered for hemoptysis.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is 49 years old or younger.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient does NOT have a 20 pack per year history of smoking.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for suspected pulmonary Embolus.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has been completed; Ths Interstitial Lung Disease is suspected; The chest x-ray was abnormal	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	Apr-Jun 13 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has NOT been completed	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 9 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 10 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	A FEW MONTHS; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given DIFFERENT TEST; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and/or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	18	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	30	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	31	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; An abnormal imaging (xray) finding led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; The patient had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; This study is being requested for 'none of the above'; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Coughing up blood (hemoptysis) describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	It is unknown if the patient was seen by a specialist because of the traumatic injury.; Chest pain describes the reason for this request.; Abnormal imaging (xray) finding was noted on evaluation after the injury.; This is a request for a Chest CT.; This study is being requested for chest injury or trauma within the past 2 weeks.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	It is unknown if they had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	No, the patient was NOT seen by a specialist because of the traumatic injury.; Chest pain describes the reason for this request.; Abnormal finding on physical examination was noted on evaluation after the injury.; This is a request for a Chest CT.; This study is being requested for chest injury or trauma within the past 2 weeks.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Pt has possible cancer due to her very abnormal blood work.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	SEE CLINICALS; It is not known if there is radiologic evidence of asbestosis.; "The caller doesn't know if there is radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; It is not known if there is radiologic evidence of a lung abscess or empyema.; It is not known if there is radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; It is unknown if there is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; This study is being ordered for known or suspected inflammatory disease or pneumonia.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	There is not a known inflammatory disease.; It is not known if there is a known tumor.; There is no known vascular disease.; A Chest/Thorax CT is being ordered.; The patient is NOT having an operation on the chest or lungs.; This study is being ordered for a pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	There is radiologic evidence of mediastinal widening.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for vascular disease other than cardiac.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	There is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 28 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	This is a request for a Thorax (Chest) CT.; Abnormal imaging test describes the reason for this request.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Two separate issues. L Spine XR showing extensive damage. Severe pain, saddle anesthesia. This patient is inappropriate for PT trial without MRI. ;Chest CT- long term smoker, chest pain, cough. XR concerning for cancer.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	ULTRASOUND SHOWS A 20 MM CERVICAL LYMPH NODE, WORRISOME FOR METASTATIC DZ. RADIOLOGIST RECOMMENDED CT CHEST AND CT NECK; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71250	Computed tomography, thorax; without contrast material	Unexplained weight loss describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; Patients who have stopped smoking 15 or more years ago do not meet the criteria for lung cancer screening.; The patient quit smoking 15 or more years ago.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	20PK YR SMOKING HX &gt; BTW AGE 50- 80 &gt;CURRENT SMOKER &gt; PATIENT CANNOT CLIMB A FLIGHT OF STAIR INDEPENDANTLY W/O STOPPING; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Cigarette smoker, Current every day smoker, 30 + Pack Years; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; It is unknown if the patient is presenting with pulmonary signs or symptoms of lung cancer or if there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	LUNG CANCER SCREENING.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; LUNG CANCER SCREENING.; There has not been any treatment or conservative therapy.; LUNG CANCER SCREENING.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	no; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; It is unknown when or if the patient quit smoking.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	patient has 20 plus of smoking history; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	patient uses an ecigarette/vape. he doesnt not smoke actual packs of cigarettes so there is no way to know how many he smokes a day.; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; It is unknown if the patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; It is unknown if the patient is presenting with pulmonary signs or symptoms of lung cancer or if there are other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	133	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	135	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	136	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	37	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	38	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Unintentional weight loss and a current smoker; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	will fax in clinicals; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Suspected Vascular Disease.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; This is not an evaluation for thoracic outlet syndrome.; There are no signs or symptoms indicative of vascular insufficiency to the neck or arms.; There are no signs or symptoms indicative of Superior Vena Cava syndrome.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	*most recent echocardiogram on 2/17/22 that he was noted to have an aneurysm of the ascending aorta; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; It is not known if this is a pre-operative evaluation, post operative evaluation or follow up to a previous angiogram or MR angiogram.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	EDEMA ;Shortness of breath; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	History of ascending aortic aneurysm at 4.6 cm seen on previous CT scan. He is due for recheck per Cardiologist Dr. Dylan Thaxton. Last CT scan performed on 10/4/2017.; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a Follow-up to a previous angiogram or MR angiogram.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; There are no signs or symptoms indicative of a progressive vascular stenosis.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Vascular Disease; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Suspected Vascular Disease.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; This is not an evaluation for thoracic outlet syndrome.; There are signs or symptoms indicative of vascular insufficiency to the neck or arms.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 33 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 34 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Will fax; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Possible diaphragm tear or hernia; This study is NOT being ordered for a Work-up for Suspicious Mass, Known Tumor, Known or Suspected Inflammatory Disease, etc...; This is a request for a chest MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	This study is being ordered for a work-up of a suspicious mass.; There is radiographic or physical evidence of a lung or chest mass.; This is a request for a chest MRI.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	71555 Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	Thoracic aortic aneurysm; This is a request for an MR Angiogram of the chest or thorax	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72125 Computed tomography, cervical spine; without contrast material	; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72125 Computed tomography, cervical spine; without contrast material	Questionable midline anterior C1 fracture. There is no films are possible CT cervical spine;recommended.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72125 Computed tomography, cervical spine; without contrast material	Syncope, unspecified syncope type; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; The patient is experiencing sensory abnormalities such as numbness or tingling.; There is a reason why the patient cannot have a Cervical Spine MRI.; This study is being ordered for another reason besides Abnormal gait, Lower extremity weakness, Asymmetric reflexes, Documented evidence of Multiple Sclerosis, ;Bowel or bladder dysfunction, Evidence of new foot drop, etc...	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Asymmetric reflexes.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Lower extremity weakness.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to trauma or acute injury within 72 hours.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Abnormal gait.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does not have any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to neurological deficits.; The patient is experiencing or presenting symptoms of lower extremity weakness.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72128 Computed tomography, thoracic spine; without contrast material	Provider specifically ordered CT; This is a request for a thoracic spine CT.; Caller does not know whether there is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72128 Computed tomography, thoracic spine; without contrast material	The patient does have neurological deficits.; This is a request for a thoracic spine CT.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting abnormal gait.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72128 Computed tomography, thoracic spine; without contrast material	The patient does have neurological deficits.; This is a request for a thoracic spine CT.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting lower extremity weakness.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72128 Computed tomography, thoracic spine; without contrast material	This is a request for a thoracic spine CT.; The study is being ordered due to pre-operative evaluation.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting lower extremity weakness.; There is a known condition of neurological deficits.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; It is not known if there is weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Muscle Weakness; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Trauma or recent injury; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has NOT had back pain for over 4 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; There has not been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; 06/15/2017; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; This study is being ordered for Trauma / Injury; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are NO abnormal reflexes on exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	01/25/2022; There has not been any treatment or conservative therapy.; Patient reports falling a few times recently, and since the fall he has had right sided facial numbness, he also states that he intermittently has periods of dizziness. Denies currently having headache, chest pain, dizziness, difficulty breathing, facial; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	12/01/21; There has been treatment or conservative therapy.; neck pain and facial paresthesia; Physical therapy; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 2/21/2022; There has not been any treatment or conservative therapy.; headaches, chronic neck pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	see attached clinicals; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	spurling test pos. decreased ROM. straight leg raise positive bilaterally.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatoma sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is a Medicare member.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has Focal upper extremity weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury occur within the past 72 hours.; The patient has a neurologic deficit.; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.; This is a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; The pain did NOT begin within the past 6 weeks.; This is a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a neurological deficit; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is a Medicare member.	4	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	6	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	13	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; For evaluation of a syrinx or syringomyelia (a fluid filled hole within the spinal column) describes the reason for requesting this procedure.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; Multiple Sclerosis describes the reason for requesting this procedure.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	unknown; There has not been any treatment or conservative therapy.; Significant arm and leg weakness; This study is being ordered for Other not listed	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	SEE CLINICALS; 10 YEARS AGO; There has been treatment or conservative therapy.; NUMBNESS, TINGLING, WEAKNESS, LOSS OF BOWER/BLADDER CONTROL, ACHING, BURNING, STABBING PAIN.; SEE CLINICALS; This study is being ordered for Other	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.;	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; It is not known if there is weakness or reflex abnormality.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is reflex abnormality.; SEE ATTACHED DOCUMENTATION THAT SHOWS NO RIGHT PATELLAR REFLEX	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; drops things and cannot pick up cast iron skillets - this started happening about two years ago, has progressively getting worse. Weaknesses wax and wane but seem to progressively get worse over time, she has known fibromyalgia and has neuropathy but I am	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Known Tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; It is not known if the patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has had back pain for over 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Surgery is scheduled within the next 4 weeks.; Yes, the last Lumbar spine MRI was performed within the past two weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.;	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Will fax clinicals, if required.; 4/1/2022; There has been treatment or conservative therapy.; Will fax clinicals, if required.; Will fax clinicals, if required.; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; ; There has not been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; This study is being ordered for Trauma / Injury; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are NO abnormal reflexes on exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; ; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	dorsal spine s-ray revealed multilevel degenerative changes with mild scoliosis distally, multiple bridging osteophytes and near complete disc height loss at multiple levels. Suspicious for DISH disease; several months per patient---first office visit for problem was 03/15/2022; There has not been any treatment or conservative therapy.; mid back pain with left leg "falling asleep", frequent numbness and tingling down left leg daily; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Paraspinal muscle tightness. Tenderness L3-L5. Straight leg raise positive on right.; several months ago; There has been treatment or conservative therapy.; Pt reports back pain that radiates into both legs and weakness in legs. Pt has positive straight leg raise on right.; PT; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	PATIENT HAS HAD NO IMPROVEMENT AFTER MULTPLE TRIALS OF THINGS TO TRY. NEEDING MRI TO SEE WHAT THE PROBLEM/CAUSE OF HIS PAIN; 02/22/2022; There has been treatment or conservative therapy.; CHRONIC LOW BACK PAIN ;THORACIC PAIN ;RADICULAR PAIN BLE NEUROPATHY LUMBAR/THORACIC DEGENERATIVE DISC DISEASE; 8 WEEKS OF PHYSICAL THERAPY AND HOME EXERCISES. PATIENT HAS GONE THROUGH ROUNDS OF NSAIDS, STEROIDS FOR PAIN WITH NO IMPROVEMENT; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Patient has multiple sclerosis and is having pain and weakness in her legs. She has not had a MRI for evaluation in 8-10 years.; This study is being ordered for a neurological disorder.; 1989; There has been treatment or conservative therapy.; Patient has multiple sclerosis and has been having an increase in knee/leg pain and weakness; Patient has multiple sclerosis and has not been taking medication for this. She has in the past.; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	see attached clinicals; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	SEE CLINICALS; 10 YEARS AGO; There has been treatment or conservative therapy.; NUMBNESS, TINGLING, WEAKNESS, LOSS OF BOWEL/BLADDER CONTROL, ACHING, BURNING, STABBING PAIN.; SEE CLINICALS; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	spurling test pos. decreased ROM. straight leg raise positive bilaterally.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; None of the above has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; Something other than listed has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 34 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 35 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 52 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 53 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 10 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 3 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	9	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	7	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has None of the above; It is unknown if this procedure is being ordered for acute or chronic back pain	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has Other; This procedure is NOT being ordered for acute or chronic back pain	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via BBI.; Chiropractic care has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via BBI.; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	3	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	3	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Chiropractic care has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Ice and/or heat has been used for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	19	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	11	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; The patient has Focal extremity weakness; This procedure is NOT being ordered for acute or chronic back pain	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Cannot agree/affirm; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Two separate issues. L Spine XR showing extensive damage. Severe pain, saddle anesthesia. This patient is inappropriate for PT trial without MRI. ;Chest CT- long term smoker, chest pain, cough. XR concerning for cancer.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	unknown; This study is being ordered for trauma or injury.; 3/18/2022; There has been treatment or conservative therapy.; rt hip and leg pain, low back pain; medication, physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	UNKNOWN; UNKNOWN; There has been treatment or conservative therapy.; PAIN AND PRESSURE.; PATIENT HAS TAKEN MUSCLE RELAXERS AND PATIENT HAS TRIED PHYSICAL THERAPY.; This study is being ordered for Other	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Will fax clinicals, if required.; 4/1/2022; There has been treatment or conservative therapy.; Will fax clinicals, if required.; Will fax clinicals, if required.; This study is being ordered for Inflammatory / Infectious Disease	1	Apr-2022	Jun-2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	3/29/2022; There has been treatment or conservative therapy.; The member has a large amount of weight loss.; They did blood work, x-rays and referred the member to a specialist.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	Low back/ left hip pain: started while caring for her mom on hospice in January. Bent over a work on Friday and pain shot through her low back and the left hip area into the left lower abdomen. Pain in this area since. Taking ibuprofen and not helping. So; This study is being ordered for some other reason than the choices given.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	PATIENT IS A 36 YEAR OLD FEMALE THAT IS HERE TO FOLLOW UP UTI, PATIENT REPORTS FOR 2 MONTHS SHE COMES IN FOR PAIN IN HER LEFT GROIN AREA, THAT IS DESCRIBED AS AN ACHY PAIN AT A 3/4 AND DOESN'T HAVE THE PAIN ALL THE TIME JUST DIFFERENT TIMES SUCH A LIFTING; This study is being ordered due to known or suspected infection.; "The ordering physician is NOT a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; "There are NO active, clinical findings or endoscopic findings of Crohn's disease, ulcerative colitis, or diverticulitis."; "There are no radiographical or ultrasound findings consistent with abnormal fluid collection, pelvic abscess, pelvic inflammation or ascites."; "There are no physical findings or abnormal blood work consistent with peritonitis, pelvic inflammatory disease, or appendicitis."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	Pt has bladder mesh and is having pelvic pain. No UTI noted on UA; This study is being ordered due to known or suspected infection.; "The ordering physician is NOT a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; "There are NO active, clinical findings or endoscopic findings of Crohn's disease, ulcerative colitis, or diverticulitis."; "There are no radiographical or ultrasound findings consistent with abnormal fluid collection, pelvic abscess, pelvic inflammation or ascites."; "There are no physical findings or abnormal blood work consistent with peritonitis, pelvic inflammatory disease, or appendicitis."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	The patient has painful hematuria.; The patient has not had an IVP.; This study is being ordered due to hematuria.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	This patient had an x-ray of the sacrum and coccyx due to sacral pain. It was suggested by the radiologist that this patient have a CT of the pelvis for further evaluation.; This study is being ordered for some other reason than the choices given.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	This study is being ordered because of a suspicious mass/ tumor.; "The patient has had a pelvic ultrasound, barium, CT, or MR study."; This is a request for a Pelvis CT.; There are documented physical findings (painless hematuria, etc.) consistent with an abdominal mass or tumor.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	This study is being ordered due to known or suspected vascular disease.; The ordering physician is not a surgeon or PCP who is ordering on behalf of a surgeon who has seen the patient.; There is NOT plain film, ultrasound or Doppler evidence of a vascular abnormality.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72192	Computed tomography, pelvis; without contrast material	This study is being ordered for known tumor, cancer, mass, or rule-out metastasis.; "The ordering physician is an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This study is being ordered for initial staging.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI.; Surgery is not planned for within 30 days.; The study is being ordered for Evaluation of the pelvis prior to surgery or laparoscopy.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Soft tissue mass, pelvis, deep;rectal cyst; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for osteomyelitis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for tail bone pain or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for pelvic trauma or injury.; This is an evaluation of the sacrum.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73200 Computed tomography, upper extremity; without contrast material	There is a history of upper extremity joint or long bone trauma or injury.; This is a request for an Arm CT Non Joint; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is not suspicion of upper extremity bone or joint infection.; The ordering physician is not an orthopedist or rheumatologist.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is a history of upper extremity trauma or injury.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is not a history of upper extremity trauma or injury.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is suspicion of upper extremity neoplasm or tumor or metastasis.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 06/20/2017; There has been treatment or conservative therapy.; joint pain and radiculopathy; home exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient fell and was diagnosed with tennis elbow. Pain is worsening if she grabs things or tightens her grip. 2 xrays performed. She has had physical therapy with no changes or improvement. Her condition is worsening.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	PT recommending MRIs to assess for potential cervical herniation and RTC tear.; This study is being ordered for a neurological disorder.; March 2022;pt has gone to PT and the PT/provider is recommending mri's due to wanting assessing potential cervical herniation and RTC tear.; There has been treatment or conservative therapy.; limited cervical AROM, RUE strength and Neurological symptoms.; PT treatment -due to PT's limited cervical AROM, RUE strength and neurological symptoms; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Pt. had an injury 4 days ago. Treated w oral pain medicine & steroid injection but pain is increasing daily. Radiology req. to decide if surgical intervention is needed.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from an old injury; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; It is not known if the physician has directed conservative treatment for the past 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	13	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has completed 4 weeks or more of Chiropractic care.; The patient received oral analgesics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has completed 4 weeks or more of Chiropractic care.; The patient received medication other than joint injections(s) or oral analgesics.; flexceril 10mg TID gabapentin 300 mg	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has not directed conservative treatment for the past 4 weeks.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not known if surgery or arthroscopy is scheduled in the next 4 weeks.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	15	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; It is not known if the physician has directed conservative treatment for the past 4 weeks.	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; home treatment documentatio;He had a car versus bicycle accident in May of last year He has a history of a Hill-Sachs injury. We will get MRI to reevaluate. Seems mostly like AC arthrosis along with mild RC tendinosis.had shoulder xray at time of accid; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has not directed conservative treatment for the past 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Unknown; This study is being ordered for trauma or injury.; 4/2022; There has been treatment or conservative therapy.; Mass in muscle of upper extremity, loss of range of motion, extreme pain; medication, immobilizer; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; The patient has not used a cane or crutches for greater than four weeks.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient does not have an abnormal plain film study of the foot other than arthritis.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has been treated with anti-inflammatory medications in conjunction with this complaint.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has not been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has not been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has not been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; The patient had an abnormal plain film study of the ankle other than arthritis.; There is a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; The patient had an abnormal plain film study of the ankle other than arthritis.; There is a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is a history of lower extremity joint or long bone trauma or injury.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73700 Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is suspicion of lower extremity bone or joint infection.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is not a preoperative or recent postoperative evaluation.; There is suspicion of a lower extremity neoplasm, tumor or metastasis.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Yes, this is a request for CT Angiography of the lower extremity.; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	"There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has not been treated with anti-inflammatory medications in conjunction with this complaint.; This is for pre-operative planning.; The patient does not have a documented limitation of their range of motion.; This is a request for bilateral foot MRI.; patient has wounds on both feet with bone exposed r/o any underlying mass or fractures to left foot, r/o abscess in sinus'; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; chronic sinusitis and left foot pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	"There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has not been treated with anti-inflammatory medications in conjunction with this complaint.; This is for pre-operative planning.; The patient does not have a documented limitation of their range of motion.; This is a request for bilateral foot MRI.; patient has wounds on both feet with bone exposed r/o any underlying mass or fractures to left foot, r/o abscess in sinus'; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; chronic sinusitis and left foot pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	There is a pulsatile mass.; "There is evidence of tumor or mass from a previous exam, plain film, ultrasound, or previous CT or MRI."; Non Joint is being requested.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	There is a pulsatile mass.; "There is no evidence of tumor or mass from a previous exam, plain film, ultrasound, or previous CT or MRI."; There is a suspicion of an infection.; The patient is taking antibiotics.; Non Joint is being requested.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are NO physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They did not have 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has had a recent bone scan.; The bone scan was normal.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has not been treated with crutches, protective bootm walking cast or immobilization for at least 4 weeks.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI; The study is being ordered for foot pain.; The study is being ordered for acute pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI; The study is being ordered for foot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for known or suspected septic arthritis or osteomyelitis.; A plain x-ray of the area been done.; The results of the plain film x-ray were abnormal.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for plantar fasciitis.; The patient has NOT had foot pain for over 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is NOT being ordered for chronic pain, acute pain, rule our tarsal coalition, known or suspected septic arthritis or osteomyelitis, tendonitis, neuroma or plantar fasciitis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An Ultrasound showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; 'None of the above' were noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Abnormal Varus or Valgus stress testing was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Baker's cyst (swelling in the back of the knee) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Effusion with blood (Hemarthrosis) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee immobilizer; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Neoprene knee sleeve; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 22 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Blood or abnormal fluid in the knee joint was noted as an indication for knee imaging	Apr-Jun 5 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with a Knee immobilizer.; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with Crutches.; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for a mass, tumor or cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; It is unknown if there is a suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is a study for a fracture which does not show healing (non-union fracture).; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is a pre-operative study for planned surgery.; Non Joint is being requested.; A Total Hip or Knee Arthroplasty is NOT being planned nor has one already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	HX OF DISECTOMY ON LUMBAR, NUMBNESS TINGLING, GAIT ABN.; This study is being ordered for trauma or injury.; 12/22/2021; There has been treatment or conservative therapy.; Pt has severe low back pain and hip pain.; Pt has chiro, muscle relaxers.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; It is not known if the member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; It is not known if there is a suspicion of tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; Tendon or ligament injury is not suspected.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is not due to a recent injury, old injury, Chronic Hip Pain or a Mass.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is not for hip pain.; The study is not requested for any of the standard indications for Knee MRI	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	unknown; This study is being ordered for trauma or injury.; 3/18/2022; There has been treatment or conservative therapy.; rt hip and leg pain, low back pain; medication, physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	; This study is being ordered for a metastatic disease; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	3/29/2022; There has been treatment or conservative therapy.; The member has a large amount of weight loss.; They did blood work, x-rays and referred the member to a specialist.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; It is not known if this is a request for follow up to a known tumor or abdominal cancer.; This study being ordered for; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; It is unknown if this study is being ordered for staging of a known tumor (not) prostate, known prostate CA with PSA&gt;10, abdominal mass, retroperitoneal mass or new symptoms including hematuria with known CA or tumor.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study being ordered for a palpable, observed or imaged upper abdominal mass.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study being ordered for initial staging of a known tumor other than prostate.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a kidney/ureteral stone.; This patient is experiencing hematuria.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	5	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient does not have new symptoms including hematuria, new lab results or other imaging studies including ultrasound, doppler or x-ray (plain film) findings, suspicion of an adrenal mass or suspicion of a renal mass.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient has new lab results or other imaging studies including doppler or x-ray (plain film) findings.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; There is suspicion of an adrenal mass (pheochromocytoma).; The suspicion of an adrenal mass was suggested by some type of imaging other than an Ultrasound.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; It is unknown if there are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; It is not known if there are findings that confirm hepatitis C.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of an Abscess of the upper abdominal area.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Diverticulitis.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are NO abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; There are no findings that confirm hepatitis C.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are clinical findings or indications of Hematuria.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are clinical findings or indications of Lymphadenopathy.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are clinical findings or indications of unexplained abdominal pain in patient over 75 years of age.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for organ enlargement.; Something other than the spleen, liver or kidney is enlarged.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 4/5/2022; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Vascular Disease; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdomen.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	; There has been treatment or conservative therapy.; ; CHEST AND ABDOMINAL X RAY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	5-6-2021; There has not been any treatment or conservative therapy.; right lung infection possible neoplasm. Finished antibiotics and still has nasty cough and worried about a mass on her right lung, SOB, fatigue; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	5/10/2022; There has been treatment or conservative therapy.; severe weight loss abdominal pain; Physical Therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/05/2022; There has not been any treatment or conservative therapy.; abd pain/rt lower quad pain/pelvic pain/abnormal US/hematuria /enlarged uterus; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	Pt has possible cancer due to her very abnormal blood work.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for protein.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were unknown.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for bilirubin.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for bilirubin.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were unknown.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; It is not known if this is the first visit for this complaint.; It is unknown if there has been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; It is unknown if there has been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The last Abdomen/Pelvis CT was performed within the past 10 months.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is follow up trauma.; There is not laboratory or physical evidence of an intra-abdominal bleed.; There is not physical or abnormal blood work consistent with peritonitis or abdominal abscess.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; It is unknown if the patient has Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient has Crohn's Disease.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed within the past 10 months.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed within the past 10 months.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 29 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 30 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 31 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam are unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has been completed.; The results of the contrast/barium x-ray were normal.; The patient had an endoscopy.; The endoscopy was normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 35 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 36 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Unknown; There has been treatment or conservative therapy.; shoulder pain , numbness on shoulder, Pt had Bronchitis , and hepatitis B , acid reflux , COPD; Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for hematuria.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for known or suspected vascular disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for organ enlargement.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if the patient has a renal cyst or tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for organ enlargement.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; The abnormality found on a previous CT, MRI or Ultrasound was not in the liver, kidney, pancreas or spleen.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if the patient has a renal cyst or tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a renal cyst.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a renal cyst.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if there is suspicion of metastasis.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; This study is NOT being ordered to evaluate an undescended testicle in a male.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74185 Magnetic resonance angiography, abdomen, with or without contrast material(s)	This is a request for a MR Angiogram of the abdomen.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74261 Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	; This patient does not have a medical problem that makes him/ her unsuitable for conventional colonoscopy.; This patient has not undergone an attempted but incomplete conventional colonoscopy.; This patient does not have a known obstructing colorectal cancer.; This CT Colonoscopy is being ordered for diagnostic purposes; The member had colon screening studies completed prior to this request	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	74263 Computed tomographic (CT) colonography, screening, including image postprocessing	This is a request for CT Colonoscopy for screening purposes only.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	75571 Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Hyperlipidemia, unspecified;Duration of Symptoms;;Start: 05/27/2022---when found on labs;Physical Exam Findings;;Preliminary Procedures Already Completed: HDL Panel W/O Direct Lipid;Scoped Procedures / Referrals;;Other:Medications: Started on etc ; This is a request for a CT scan for evaluation of coronary calcification.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	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)	This is a request for CTA Coronary Arteries.; The study is requested for known or suspected cardiac septal defect.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	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)	This is a request for CTA Coronary Arteries.; The study is requested for known or suspected valve disorders.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	history of breast cancer.; This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; No, this is not an individual who has known breast cancer in the contralateral (other) breast.; No, this is not a confirmed breast cancer.; No, this patient does not have axillary node adenocarcinoma.; It is not know if there are anatomic factors (deformity or extreme density) that make a simple mammogram impossible.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	mammo birads 4 and stereotactic biopsy birads 0-need MRI eval. please see report; This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are NOT benign lesions in the breast associated with an increased cancer risk.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Per diagnostic mammogram-Secondart to the heterogeneously complex appearance to the breast pattern with concern for interval change from prior mammograms would recommend further evaluation with MRI of the breast with contrast for better assessment; This is a request for Breast MRI.; This study is being ordered for something other than known breast cancer, known breast lesions, screening for known family history, screening following genetic testing or a suspected implant rupture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Pt has lifetime risk of 21%, with a paternal aunt diagnosed with breast cancer@50 and a maternal aunt diagnosed with Ovarian Cancer@45, Breast cancer@52.; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; Yes, this is an individual who has known breast cancer in the contralateral (other) breast.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a suspected implant rupture.; Yes,this study is being ordered to evaluate a suspected silicone implant rupture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are benign lesions in the breast associated with an increased cancer risk.	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	unknown; This is a request for Breast MRI; This study is being ordered for something other than known breast cancer, known breast lesions, screening for known family history, screening following genetic testing or a suspected implant rupture.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	77078 Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	This is a request for a Bone Density Study.; This patient has not had a bone mineral density study within the past 23 months.; This is a bone density study in a patient with clinical risk of osteoporosis or osteopenia.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	77078 Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	This is a request for a Bone Density Study.; Unknown if this patient had a bone mineral density study within the past 23 months.; This is a bone density study in a patient with clinical risk of osteoporosis or osteopenia.; The patient has not been on steroid therapy for more than 3 months.; This is a repeat study due to a change in treatment or a change in symptoms of osteoporosis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Known CAD (hypertension) well-controlled w/medication. Need imaging to properly assess for other cardiac issues; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; patient c/o he feels heart rate drop. Usually, stays at 60 bpm; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	possible stroke; This study is being ordered for Vascular Disease.; 1 month ago; There has not been any treatment or conservative therapy.; double vision, face drooping, chest pain, shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months; Other cardiac stress testing was completed less than one year ago	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.;; The study is requested for suspected coronary artery disease.;; The member has known or suspected coronary artery disease.;; The BMI is 40 or greater	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.;; The member does not have known or suspected coronary artery disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via BBI.;; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.; The symptoms began or changed More than 1 year ago.;; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.;; Agree.;; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.; The symptoms began or changed More than 1 year ago.;; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.;; Agree.;; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.; The symptoms began or changed within the last year.;; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	7	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.;; Agree.;; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed.;; Changing symptoms of chest pain or shortness of breath best describes the reason for ordering this study.;; The symptoms began or changed within the last 6 months	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.;; Agree.;; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed.;; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study.;; The symptoms began or changed within the last 6 months	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78813 Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.;; This study is not being ordered for Cervical CA, Brain Cancer/Tumor or Mass, Thyroid CA or other solid tumor.;; This is a Medicare member.;; This study is being requested for None of the above.;; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.;; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.;; This study is being requested for Lung Cancer.;; This is a Medicare member.;; This is a Medicare member.;; This study is being requested for None of the above.;; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; It is unknown how many PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is Existing (stable, being followed with any modality); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Known CAD (hypertension) well-controlled w/medication. Need imaging to properly assess for other cardiac issues; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; patient c/o he feels heart rate drop. Usually, stays at 60 bpm; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	known murmur since childhood. new to a physician. never been seen by dr before.; This study is being ordered for Vascular Disease.; +1 systolic murmur. ;sudden onset of pressure type chest pain; There has not been any treatment or conservative therapy.; He has had a few episodes slightly pressure type chest pain substernally of sudden onset. These episodes come on spontaneously and also resolved spontaneously. They are associated with clamminess nausea diaphoresis and shortness of breath. They do not see; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	possible stroke; This study is being ordered for Vascular Disease.; 1 month ago; There has not been any treatment or conservative therapy.; double vision, face drooping, chest pain, shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; it is unknown if there are there new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are NO new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was Rhythm abnormalities	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; Something other than Myocardial Perfusion Imaging, Exercise Treadmill Testing, Stress Echocardiography, or EKG has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; Stress Echocardiography has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; This study is being ordered for symptoms of a heart problem	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; Abnormal physical exam findings, signs or symptoms that suggest cardiac pathology or structural heart disease best describes my reason for ordering this study.; This is an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is NOT Cardiology or Nephrology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; New abnormal physical exam findings, signs or symptoms that suggest cardiac pathology or structural heart disease best describes my reason for ordering this study.; It is unknown if this is an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is NOT Cardiology or Nephrology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; New abnormal physical exam findings, signs or symptoms that suggest cardiac pathology or structural heart disease best describes my reason for ordering this study.; This is NOT an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is NOT Cardiology or Nephrology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; It is unknown if this is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient does not have a history of a recent heart attack or hypertensive heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has high blood pressure	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient does not have a history of a recent heart attack or hypertensive heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Known or suspected left ventricular disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; There has been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient has shortness of breath; Known or suspected pulmonary hypertension	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient has shortness of breath; Shortness of breath is not related to any of the listed indications.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This study is being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This study is NOT being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient has shortness of breath; Known or suspected Congestive Heart Failure.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of cardiac arrhythmias; This study is being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of Marfan's syndrome.; There has been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of Marfan's Syndrome.; This is NOT for annual evaluation of Marfan's Syndrome.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of Marfan's syndrome.; This is NOT for the initial evaluation of Marfan's Syndrome.; This is for annual evaluation of Marfan's Syndrome.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of Pericardial Disease.; This is for the initial evaluation of a pericardial disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; There has been a change in clinical status since the last echocardiogram.; This request is NOT for initial evaluation of a murmur.; This is a request for follow up of a known murmur.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; There has NOT been a change in clinical status since the last echocardiogram.; This request is NOT for initial evaluation of a murmur.; This is a request for follow up of a known murmur.	Apr-Jun 2 2022 2022





4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	26	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	27	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The onset or change in symptoms 6 months or less ago.; It is unknown if Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; The last Transthoracic Echocardiogram was more than 6 months ago.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; There is no known valvular heart disease.; Pre-existing murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; It is not known if there is known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The atrial fibrillation and/or atrial flutter is new onset.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; There is no known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; A Transthoracic Echocardiogram has not been completed.; New onset murmur best describes the reason for ordering this study.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; It is not known if there is known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The atrial fibrillation and/or atrial flutter is new onset.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 18 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms is unknown; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is known valvular heart disease.; The last Transthoracic Echocardiogram was more than 6 months ago.; The patient's valvular heart disease is moderate to severe.; Pre-existing murmur best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is no known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This study is being ordered for Vascular Disease.; 05/12/2022; There has been treatment or conservative therapy.; SOB, chest pain; Chest x-ray; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology unknown; This study is being ordered for a neurological disorder.; April 22,2021; There has not been any treatment or conservative therapy.; loss of balance, weakness and shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This is a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested after a completed NON diagnostic transthoracic echocardiogram.; The patient is 18 years of age or older.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This is a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for pre-operative evaluation of mitral valve regurgitation; The patient is 18 years of age or older.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93350 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;	Chest pain with exertion, left sided, relieved with rest, radiation to jaw; This is a request for a Stress Echocardiogram.; This patient had a Nuclear Cardiology study within past 8 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Approval	93350 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;	Enter answer here - or Type In Unknown If No Info Given. This is a request for a Stress Echocardiogram.; This patient has not had a Nuclear Cardiac study within the past 8 weeks.; This study is not being ordered for: CAD, post MI evaluation, or as a pre/post operative evaluation.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	HAS SHORTNESS OF BREATH AT TIMES ALONG WITH DYSPNEA ON EXERTION; This is a request for a Stress Echocardiogram.; This patient has not had a Nuclear Cardiac study within the past 8 weeks.; This study is not being ordered for: CAD, post MI evaluation, or as a pre/post operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	The patient is presenting new symptoms of chest pain or increasing shortness of breath.; This is a request for a Stress Echocardiogram.; This patient has not had a Nuclear Cardiac study within the past 8 weeks.; This study is being ordered for known Coronary Artery Disease.; This patient had a previous cardiac surgery or angioplasty.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	The patient is presenting new symptoms of chest pain or increasing shortness of breath.; This is a request for a Stress Echocardiogram.; This patient has not had a Nuclear Cardiac study within the past 8 weeks.; This study is being ordered for known Coronary Artery Disease.; This patient's diagnosis was established by a previous stress echocardiogram, nuclear cardiology study, or stress EKG.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	The patient is presenting with symptoms of atypical chest pain and/or shortness of breath.; There are documented clinical findings of hyperlipidemia.; The patient has not had a recent non-nuclear stress test.; This is a request for a Stress Echocardiogram.; This patient has not had a Nuclear Cardiac study within the past 8 weeks.; This study is being ordered for suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	The patient is presenting with symptoms of atypical chest pain and/or shortness of breath.; There are no documented clinical findings of hyperlipidemia.; The patient has not had a recent non-nuclear stress test.; ; This is a request for a Stress Echocardiogram.; This patient has not had a Nuclear Cardiac study within the past 8 weeks.; This study is being ordered for suspected coronary artery disease.; This patient is clinically obese or has an emphysematous chest configuration.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	The patient is presenting with symptoms of atypical chest pain and/or shortness of breath.; There are no documented clinical findings of hyperlipidemia.; There are documented clinical findings of hypertension.; The patient has not had a recent non-nuclear stress test.; This is a request for a Stress Echocardiogram.; This patient has not had a Nuclear Cardiac study within the past 8 weeks.; This study is being ordered for suspected coronary artery disease.; "Patient is not clinically obese, nor has an emphysematous chest configuration."	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; The member does not have known or suspected coronary artery disease	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	93350 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;	This is a request for a Stress Echocardiogram.; To evaluate a suspected cardiac mass.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	S8037	MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has not undergone an unsuccessful ERCP.; The patient does not have an altered biliary tract anatomy that precludes ERCP.; It is not known if patient requires evaluation for a congenital defect of the pancreatic or biliary tract.; The MRCP will be used to identify a pancreatic or biliary system obstruction that cannot be opened by ERCP.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Approval	S8037	MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has not undergone an unsuccessful ERCP.; The patient does not have an altered biliary tract anatomy that precludes ERCP.; The patient does not require evaluation for a congenital defect of the pancreatic or biliary tract.; The MRCP will be used to identify a pancreatic or biliary system obstruction that cannot be opened by ERCP.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70336	Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)	Radiology Services Denied Not Medically Necessary	This is a request for a temporomandibular joint MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for a neurological disorder.; Pain through the back of the neck starting 2 years ago. Hx of TMJ surgery.; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; CT of Brain: Dizziness, weakness and visual Disturbance.;;CT of Lumbar Spine: Sharp lower back pain with numbness in the legs and feet.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	N/A; This study is being ordered for a neurological disorder.; 04/21/22; There has been treatment or conservative therapy.; N/A; Med change; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' describes the congenital anomaly of the skull.; Known or suspected congenital anomaly best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' describes the headache's character.; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 34 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are NO recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness; This is NOT a follow up request for a known hemorrhage/hematoma or vascular abnormality	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450	Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The headache's character is unknown.; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	25 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	26 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a headache involving the back of the head and the patient is over 55 years old; Headache best describes the reason that I have requested this test.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a known brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	11 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a suspected brain tumor.; It is unknown if there are documented neurologic findings suggesting a primary brain tumor.; Known or suspected tumor best describes the reason that I have requested this test.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a suspected tumor outside the brain.; Known or suspected tumor best describes the reason that I have requested this test.	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	5 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected blood vessel abnormality (AVM, aneurysm) with documented new or changing signs and or symptoms best describes the reason that I have requested this test.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for a neurological disorder.; April 22,2021; There has not been any treatment or conservative therapy.; loss of balance, weakness and shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	Radiology Services Denied Not Medically Necessary	H/o TMJ as teenager, reports trauma to right side of face (timeframe undocumented) and since when her right jaw pops it sends shooting pain down her neck under her right ear. Reports hearing loss in right ear.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Off and on for a few years.; There has been treatment or conservative therapy.; Right ear pain; Given ciprofloxacin-hydrocortisone and ibuprofen in the ER on 03/23/2022; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder; Pain through the back of the neck starting 2 years ago. Hx of TMJ surgery.; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	chronic sinusitis; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; headache, dizziness, left ear pain, and nausea. Issues with allergies; Medications And PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	H/o TMJ as teenager, reports trauma to right side of face (timeframe undocumented) and since when her right jaw pops it sends shooting pain down her neck under her right ear. Reports hearing loss in right ear.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Off and on for a few years.; There has been treatment or conservative therapy.; Right ear pain; Given ciprofloxacin-hydrocortisone and ibuprofen in the ER on 03/23/2022; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	Has allergies and significant nasal congestion. Has been using Afrin for several weeks. Congestion worsening ;Has tried allegra, zyrtec, flonase without relief; This study is being ordered for Inflammatory/ Infectious Disease.; 04/13/2022; It is not known if there has been any treatment or conservative therapy.; Nose: Congestion present. Comments: bilaterally enlarged nasal turbinates ;Patient complains of a headache; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	She says that her eyelids twitch and her face is numb on the Left side. She states that because of the twitching her vision is very blurry; This study is being ordered for trauma or injury.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; It is unknown if the patient is immune-compromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been less than 14 days since onset; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; It is unknown if the patient is immune-compromised.; The patient's current rhinosinusitis symptoms are unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is immune-compromised.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been less than 14 days since onset; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; It is not known if there has been any treatment or conservative therapy.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal C-Spine x-ray showing DDD at C-4/C-5.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 4/19/2022; There has been treatment or conservative therapy.; Pain to palpation left chest, shoulder and elbow. pain with rom of elbow and shoulder. C-spine pain, LUE paresthesia.; DEXAMETHASONE/DEPO MEDROL INJECTION GIVEN AT OFFICE VISIT ON 4/20/22.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/19/22; There has not been any treatment or conservative therapy.; head and back pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for trauma or injury.; 5/24/2022; There has not been any treatment or conservative therapy.; neck pain and pain at base of skull, acute headaches, cervical spine pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	PATIENT KNOWN TO HAVE STAGE 4 METASTATIC LUNG CANCER. TROUBLE SWALLOWING, CHOKING ON FOOD AND FLUIDS, WORSENING; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; It is not known if there is a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; It is not known if the neck mass has been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is NOT a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; It is unknown if surgery is scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for recent trauma or other injury.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	has years of headaches (around 5 a week) but worsening in frequency and intensity recently and has very strong family history of multiple family members with aneurysms in the brain;will get imaging below;declines neuro for now;will get CTA head and nec; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; has years of headaches (around 5 a week) but worsening in frequency and intensity recently and has very strong family history of multiple family members with aneurysms in the brain;will get imaging below;declines neuro for now;will get CTA head and nec; There has not been any treatment or conservative therapy.; has years of headaches (around 5 a week) but worsening in frequency and intensity recently and has very strong family history of multiple family members with aneurysms in the brain;will get imaging below;declines neuro for now;will get CTA head and nec; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Lack of improvement with conservative measures, need to rule out intracranial process.; This study is being ordered for a neurological disorder.; 08/10/2020; There has been treatment or conservative therapy.; Dizziness and Vomiting; Meclizine 2 tabs 2xdaily;fluticasone propionate;Claritine; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	NO IMPROVEMENT IN SYMPTOMS; This study is being ordered for a neurological disorder.; SEIZURES; There has been treatment or conservative therapy.; SEIZURES;SYNCOPE;COLLAPSE; MEDICATIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the brain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	has years of headaches (around 5 a week) but worsening in frequency and intensity recently and has very strong family history of multiple family members with aneurysms in the brain;will get imaging below;declines neuro for now;will get CTA head and nec; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; has years of headaches (around 5 a week) but worsening in frequency and intensity recently and has very strong family history of multiple family members with aneurysms in the brain;will get imaging below;declines neuro for now;will get CTA head and nec; There has not been any treatment or conservative therapy.; has years of headaches (around 5 a week) but worsening in frequency and intensity recently and has very strong family history of multiple family members with aneurysms in the brain;will get imaging below;declines neuro for now;will get CTA head and nec; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Lack of improvement with conservative measures, need to rule out intracranial process.; This study is being ordered for a neurological disorder.; 08/10/2020; There has been treatment or conservative therapy.; Dizziness and Vomiting; Meclizine 2 tabs 2xdaily;fluticasone propionate;Claritine; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	NO IMPROVEMENT IN SYMPTOMS; This study is being ordered for a neurological disorder.; SEIZURES; There has been treatment or conservative therapy.; SEIZURES;SYNCOPE;COLLAPSE; MEDICATIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; "This is a request for orbit,face, or neck soft tissue MRI.239.8"; The reason for the study is not for trauma, infection,cancer, mass, tumor, pre or post-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	On 5/16/22: 53 y/o male presenting to the clinic with his wife with the chief complaint of numb face and can't hear out of left ear. Patient states a few days ago his neck popped and the left side of his face all the way to his shoulder is completely numb; "This is a request for orbit,face, or neck soft tissue MRI.239.8"; The reason for the study is not for trauma, infection,cancer, mass, tumor, pre or post-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Pt with cervical radiculopathy and bilateral hand/digit numbness.; "This is a request for orbit,face, or neck soft tissue MRI.239.8"; The reason for the study is not for trauma, infection,cancer, mass, tumor, pre or post-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	RULE OUT HERNIATED NUCLEUS PULPOSUS (HNP); This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; LEFT ARM WEAKNESS;LEFT ARM PAIN;NECK PAIN;LOWER BACK PAIN;PERSONAL HISTORY OF OSTEOPOROSIS FRACTURE; PHYSICAL THERAPY;MEDICATION THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for an Orbit MRI.; There is a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70544	Magnetic resonance angiography, head; without contrast material(s)	Radiology Services Denied Not Medically Necessary	No Info Give; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; She is having falls on a regular basis, due to decrease in her lower extremity strength and having difficulty feeling the floor underneath her. In the past week, she has wrecked her car twice due to not being able to appropriately feel the foot pedals. Sh; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70544	Magnetic resonance angiography, head; without contrast material(s)	Radiology Services Denied Not Medically Necessary	no info given; This study is being ordered for a neurological disorder.; January 2022; There has been treatment or conservative therapy.; Pain in right jaw and ear; Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70544	Magnetic resonance angiography, head; without contrast material(s)	Radiology Services Denied Not Medically Necessary	WILL FAX RECORDS; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70547	Magnetic resonance angiography, neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	pt fell and had severe pain since/; This is a request for a Neck MR Angiography.; The patient has NOT had an onset of neurologic symptoms within the last two weeks.; The patient has NOT been diagnosed with Coarctation of the aorta, Marfan's syndrome, Neurofibromatosis, or Moya-moya disease.; The patient has NOT had an ultrasound (doppler) of the neck or carotid arteries.; The patient does not have carotid (neck) artery surgery.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; headache, dizziness, left ear pain, and nausea. Issues with allergies; Medications And PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	June 09, 2022; There has been treatment or conservative therapy.; Bilateral blurry vision, neck pain, right arm pain and numbness.; Medrol dose pack and Norflex.; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	Pt has had concerning issues with memory for 2 years and now having headaches with neck pain due to recent MVA.; This study is being ordered for trauma or injury.; 10/4/2021; There has not been any treatment or conservative therapy.; Headache, neck pain, thoracic pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Chronic headache, longer than one month describes the headache's character.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; New onset within the past month describes the headache's character.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have a sudden severe, chronic or recurring or a thunderclap headache.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 17 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a sudden and severe headache.; The patient has NOT had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has vision changes.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has fatigue or malaise	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient had a memory assessment for cognitive impairment completed; The patient does NOT have normal results of B12, TSH and other metabolic labs	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment; The patient has NOT had labs completed, including B12, TSH (Thyroid-stimulating hormone), CBC (Complete Blood Count), and CMP (Comprehensive Metabolic Panel)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a memory assessment for cognitive impairment completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; This study is NOT being ordered as a 12 month annual follow up.; This is a routine follow up.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	WEAKNESS.; This study is being ordered for a neurological disorder.; WEAKNESS; There has been treatment or conservative therapy.; WEAKNESS; WEAKNESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	70554 Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, not requiring physician or psychologist administration	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 2/21/2022; There has not been any treatment or conservative therapy.; headaches, chronic neck pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Inflammatory/ Infectious Disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	'None of the above' describes the reason for this request.; The patient had an abnormal finding on physical exam related to the suspicion of cancer.; This is a request for a Chest CT.; This study is being requested for suspected cancer or tumor.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	05/03/2022; There has been treatment or conservative therapy.; diarrhea; Colonoscopy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	05/10/2022; There has been treatment or conservative therapy.; hematuria, gastric pain; PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	05/20/2022; There has not been any treatment or conservative therapy.; abnormal weight loss, coughing abdominal pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	12/10/2021; It is not known if there has been any treatment or conservative therapy.; CHEST PAIN, UPPER ABD PAIN AND SHORTNESS OF BREATH; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; The patient is 49 years old or younger.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal C-Spine x-ray showing DDD at C-4/C-5.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 4/19/2022; There has been treatment or conservative therapy.; Pain to palpation left chest, shoulder and elbow. pain with rom of elbow and shoulder. C-spine pain, LUE paresthesia.; DEXAMETHASONE/DEPO MEDROL INJECTION GIVEN AT OFFICE VISIT ON 4/20/22.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; An abnormal finding on physical examination led to the suspicion of infection.; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema); Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; An abnormal imaging (xray) finding led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Enter date of initial onset here - or Type In Unknown If No Info Given &gt; 2021; It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	evaluation for possible cancer given significant weight loss in past six months; There has not been any treatment or conservative therapy.; 40 pound unintentional weight loss over past 3 months; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	It is unknown if surgery is scheduled within the next 30 days.; A Chest/Thorax CT is being ordered.; The patient is having an operation on the chest or lungs.; This study is being ordered for a pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Monitor suprahilar lung mass. History of exposure to graffiti and chemicals; "There IS evidence of a lung, mediastinal or chest mass noted within the last 30 days."; They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	PATIENT KNOWN TO HAVE STAGE 4 METASTATIC LUNG CANCER. TROUBLE SWALLOWING, CHOKING ON FOOD AND FLUIDS, WORSENING; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Pt has had significant weight loss over the past 6 months. Her BMI is currently 18 without explanation; There has been treatment or conservative therapy.; Weight loss and weakness; Increase caloric intake; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Pt has worsening dysautonomia symptoms; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/03/2022; There has been treatment or conservative therapy.; Pt is having shortness of breath, tachycardia, chest pain, dizziness, weakness with worsening dysautonomia symptoms; Pt is on 2 liters oxygen nasal cannula due to hypoxemia, she is taking midodrine and diliazem; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia. They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	6	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Thorax (Chest) CT.; Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Unexplained weight loss describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	unintentional loss of weight over last 6 months; There has not been any treatment or conservative therapy.; pt has lost 10 pounds in the last six months, loss of appetite; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; There has been treatment or conservative therapy.; shoulder pain, numbness on shoulder, Pt had Bronchitis, and hepatitis B, acid reflux, COPD; Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; There has not been any treatment or conservative therapy.; Kadarius continues to have multiples sores all over his body. He has seen dermatology and biopsies were taken but he was given no diagnosis as yet. He saw Hematology when his white count was low but it has now normalized. He continues to lose weight.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Inflammatory/ Infectious Disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	20 PK YR SMOKING HX & BTW 50 -80 & FORMER SMOKER: QUIT 4YR AGO; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	current smoker, asymptomatic; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	QUIT SMOKING 13YR AGO FORMER SMOKER BTW AGE 50 - 80 20 PK PER YR HX OF SMOKING; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	Smoker for over 30 Years over 30 packs per year; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	57 y/o with new-onset hemoptysis with a 13 lb unintentional weight loss over less than 2 months in a patient who is a long-time smoker.; This study is not requested to evaluate suspected pulmonary embolus.; It is not known if this study will be performed in conjunction with a Chest CT.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	History of cancer; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This is the initial follow up for a Aortic aneurysm that was found in October 2021; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	abnormal ultrasound with implants; This study is being ordered for a congenital abnormality.; The patient is 18 years or older.; This is a request for a chest MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	rt clavicle pain since 03.07.2022. chronic pain.- 3.11 pt called on 5/13/22 bump on collarbone is still bothering her; This study is NOT being ordered for a Work-up for Suspicious Mass, Known Tumor, Known or Suspected Inflammatory Disease, etc...; This is a request for a chest MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for trauma or injury.; 5/14/2022; There has not been any treatment or conservative therapy.; patient is having a moderate amount of pain, 6/10 on pain scale.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Congenital Anomaly.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/1/2022; There has been treatment or conservative therapy.; swollen lymph nodes and neck pain; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	Dizziness, ; Neck Pain; Headaches; Insomnia; Decreased ROM; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	enlarged posterior cervical lymph node in patient with history of breast cancer and elevated WBC; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	MRI was denied. Patient has done chiropractor services with no improvement. Neurologic deficits to bilateral upper extremities. Been going on for 5 weeks with worsening symptoms.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	Neck pain; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	Pt complains of neck pain, especially in the middle of neck. Has been going on for a while.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	RTC for R arm numbness. Pain in his R neck as well. Says that he weed-ate and then slept on the couch that night. Woke up with pains in the back of his arm and numbness in the R hand. Says that sx's are most bothersome in fingers 1, 2, and 3. No numbness ; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Lower extremity weakness.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	The patient does not have any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; There is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to neurological deficits.; There has been a supervised trial of conservative management for at least 6 weeks.; "The caller indicated that the patient is not experiencing or presenting symptoms of Abnormal Gait, Lower Extremity Weakness, Asymmetric Reflexes, Cauda Equina Syndrome, Bowel or Bladder Dysfunction, New Foot Drop, or Radiculopathy."; The patient is experiencing sensory abnormalities such as numbness or tingling.; There is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72125	Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	X-ray shows reversal of the normal cervical lordosis with slight grade 1 anterior listhesis of C5 on C6.;Patient has numbness and tingling in fingers of left hand.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This is a request for a thoracic spine CT.; Caller does not know whether there is a reason why the patient cannot undergo a thoracic spine MRI; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	MID BACK PAIN; This is a request for a thoracic spine CT.; Caller does not know whether there is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	the pain hurts at the site of where his kidney was removed in 2019. Pain is right T8 area with tingling, pain and worsening pain over last 4 months.; This is a request for a thoracic spine CT.; There is no reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine CT.; It is not known if there is evidence of tumor or metastasis on bone scan or x-ray.; The study is being ordered due to suspected tumor with or without metastasis.; There is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	Will Fax additional clinicals; This is a request for a thoracic spine CT.; Caller does not know whether there is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Congenital Anomaly.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; CT of Brain: Dizziness, weakness and visual Disturbance.;;CT of Lumbar Spine: Sharp lower back pain with numbness in the legs and feet.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	Lumbar radiculopathy; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Lumbar radiculopathy; There has been treatment or conservative therapy.; Lumbar radiculopathy; Lumbar radiculopathy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; It is not known if the patient has new signs or symptoms of bladder or bowel dysfunction.; There is reflex abnormality.; CHRONIC MIDLINE BACK PAIN; It is not known if there is x-ray evidence of a lumbar recent fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; abnormal motor strength (decreased in right leg.). Right Lower Extremity: decreased strength in right leg.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Patient here to discuss NCS today. They revealed moderate CTS of the RUE, of which he has had surgery 2-3x already. Patient's RUE also showed neuropathy. NCS of BLE showed chronic neuropathy, not of acute nature. At this time, getting CT of lumbar spine, ; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; It is not known if the patient has had back pain for over 4 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 6 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 6 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Known or Suspected Infection or abscess; There is no laboratory or x-ray evidence of osteomyelitis.; There is not laboratory or x-ray evidence of meningitis.; There is not laboratory or x-ray evidence of an infected disc, septic arthritis, or "discitis"; It is not known if there is laboratory or x-ray evidence of a paraspinal abscess.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Spinal stenosis; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; It is not known if there is weakness or reflex abnormality.; It is not known if there is x-ray evidence of a lumbar recent fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 6 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Patient has been performing ROM exercises for greater than 6 weeks with no relief. Recent MRI shows possible compression fracture - f/u with CT recommended to further evaluate.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; MRI of cervical spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for th; There has been treatment or conservative therapy.; ; MRI of cervical spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for th; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; .; There has been treatment or conservative therapy.; .; .; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; chronic pain; 11/18/2021; There has been treatment or conservative therapy.; low back pain and neck pain chronic pain; physical therapy medication home exercises; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. ; There has been treatment or conservative therapy.; neck pain; lower back pain; pt and medication, hep; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. 2/25/2022; There has been treatment or conservative therapy.; Chronic Pain in neck & back; PT, Chiro, Home Exercises, medications; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. Symptoms started getting worse around May; There has been treatment or conservative therapy.; neck and back pain, numbness and weakness in both hands hips and toes, limited range of motion , and unable to hold or lift object.; Nsaid therapy at home; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given Describe treatment / conservative therapy here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. Will fax clinicals; It is not known if there has been any treatment or conservative therapy.; will fax clinicals; This study is being ordered for Other	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Follow-up needed to make sure diagnosis is not worsening.; 2018; There has not been any treatment or conservative therapy.; No symptoms, incidental finding on x-ray that needs follow-up; This study is being ordered for Congenital Anomaly	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	June 09, 2022; There has been treatment or conservative therapy.; Bilateral blurry vision, neck pain, right arm pain and numbness.; Medrol dose pack and Norflex.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	multilevel degenerative disc disease on x ray; more than 6 months ago; There has been treatment or conservative therapy.; the pain in her neck and back has now become more numbness; Medications, muscle relaxers, rest; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	No Info Give; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; She is having falls on a regular basis, due to decrease in her lower extremity strength and having difficulty feeling the floor underneath her. In the past week, she has wrecked her car twice due to not being able to appropriately feel the foot pedals. Sh; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology per X-ray of C-spine there are degenerative changes of disc space narrowing around a fusion he had. Minimal degenerative changes on L-spine and per radiologist if symptoms persist an MTI is recommended; 04/12/2022; It is not known if there has been any treatment or conservative therapy.; Cervical pain, lumbago with sciatica on right side, anesthesia of skin, paresthesia of skin; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Provider would like to refer patient to neurosurgery, but they won't see patient unless they have MRI images from within the last 6 months.; more than 10 years ago; There has been treatment or conservative therapy.; neck pain causing limited range of motion, back pain, numbness in legs; Pt has tried multiple OTC medications w/no relief. He's tried Rx pain medication and muscle relaxers w/some relief. He's had epidural steroid injections and sacroiliac joint injections giving some temporary relief.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Pt has had concerning issues with memory for 2 years and now having headaches with neck pain due to recent MVA.; This study is being ordered for trauma or injury.; 10/4/2021; There has not been any treatment or conservative therapy.; Headache, neck pain, thoracic pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	pt is experiencing low back pain, mid back pain, and abnormal reflexes. pt also has multiple sclerosis.; 10/10/2021; There has been treatment or conservative therapy.; neck pain, mid back pain and abnormal reflexes.; Pt, HEP, and medications; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	PT recommending MRIs to assess for potential cervical herniation and RTC tear.; This study is being ordered for a neurological disorder.; March 2022;pt has gone to PT and the PT/provider is recommending mri's due to wanting assessing potential cervical herniation and RTC tear.; There has been treatment or conservative therapy.; limited cervical AROM, RUE strength and Neurological symptoms.; PT treatment -due to PT's limited cervical AROM, RUE strenght and neurological symptoms; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Pt. denies any heavy lifting. Pt. reports low back stabbing pain. Pt. also reports muscle spasms with numbness and tingling down both legs into the feet. This pain is constant.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Second clinic visit for same complaint the patient states that the pain was radiating into her left shoulder. Complaints of weakness, dizziness and lightheadedness.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinical; see attached clinical; It is not known if there has been any treatment or conservative therapy.; see attached clinical; This study is being ordered for Other	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	severe back pain; 4/29/2022; There has been treatment or conservative therapy.; back pain; Physical therapy, medication management; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	test needed for patient to continue CESI, LESI and PT; 2017; There has been treatment or conservative therapy.; neck pain, low back pain, subjective leg weakness, sciatica, previous urinary incontinence; CESI, LESI, PT; This study is being ordered for Neurological Disorder	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	2	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; The patient has a new onset or changing radiculitis / radiculopathy	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatoma sensory changes on physical examination	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	9	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	5	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; It is unknown if any of these apply to the patient; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.	3	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The patient has a new onset or changing radiculitis / radiculopathy; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.	2	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Dermatoma sensory changes on physical examination	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	2	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Recent evidence of fracture documented by x-ray	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	1	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury occur within the past 72 hours.; There is new onset radiculitis/radiculopathy.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; It is unknown if the patient has a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine; The pain did NOT begin within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a neurological deficit; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 5 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	23	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	31	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	32	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	to see if patient needs injections or surgery. X; Patient is being seen today in clinic for new onset foot drop; There has not been any treatment or conservative therapy.; Patient has new foot drop, tingling on right leg, tingling down right arm; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; First week of June; There has not been any treatment or conservative therapy.; Altered gait, neck pain and right-sided back pain with sciatica; xrays reveal degenerative changes and other abnormalities.; This study is being ordered for Other	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for a neurological disorder.; 3/27/22; There has been treatment or conservative therapy.; neck and shoulder pain;lumbar pain with lower extremity radiculopathy; Stretching;OTC anti inflammatory medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for a neurological disorder.; 2020; It is not known if there has been any treatment or conservative therapy.; Chronic Pain;Spasms;blurred vision; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	UNKNOWN; UNKNOWN; There has been treatment or conservative therapy.; UNKNOWN; PHYSICAL THERAPY; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Weakness and pain to the left side of the body worsening since MVA in 02/2022.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; MRI of cervical spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for th; There has been treatment or conservative therapy.; ; MRI of cervical spine is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for th; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	.; .; There has been treatment or conservative therapy.; .; .; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	abnormal xray of T-spine and L-spine; approx. 2 years ago; There has been treatment or conservative therapy.; back pain; medications; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Complex Regional Pain Syndrome Type; long standing history; There has been treatment or conservative therapy.; Mid-back pain ;Back pain or radiculopathy; multiple treatments including PT, Sympathetic nerve blocks, multiple medications, etc. She has not had any improvement.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	CT report 04/12/22: T11-T12 Extreme posterior lateral disc herniation which results in severe narrowing of the left neural foramen. L1-L2 Mild posterior disc osteophyte complex. Mild narrowing of the left neural foramen. L3-L4 mild posterior disc bulge of; Unknown; There has been treatment or conservative therapy.; Severe pain radiating down both legs; Prescription strength medications; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	dorsal spine s-ray revealed multilevel degenerative changes with mild scoliosis distally, multiple bridging osteophytes and near complete disc height loss at multiple levels. Suspicious for DISH disease; several months per patient---first office visit for problem was 03/15/2022; There has not been any treatment or conservative therapy.; mid back pain with left leg "falling asleep", frequent numbness and tingling down left leg daily; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. ; There has been treatment or conservative therapy.; neck pain; lower back pain; pt and medication, hep; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. 2/25/2022; There has been treatment or conservative therapy.; Chronic Pain in neck & back; PT, Chiro, Home Exercises, medications; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. Symptoms started getting worse around May; There has been treatment or conservative therapy.; neck and back pain, numbness and weakness in both hands hips and toes, limited range of motion , and unable to hold or lift object.; Nsaid therapy at home; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 2/21/2022; There has not been any treatment or conservative therapy.; headaches, chronic neck pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. Will fax clinicals; It is not known if there has been any treatment or conservative therapy.; will fax clinicals; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Follow-up needed to make sure diagnosis is not worsening.; 2018; There has not been any treatment or conservative therapy.; No symptoms, incidental finding on x-ray that needs follow-up.; This study is being ordered for Congenital Anomaly	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	multilevel degenerative disc disease on x ray; more than 6 months ago; There has been treatment or conservative therapy.; the pain in her neck and back has now become more numbness; Medications, muscle relaxers, rest; This study is being ordered for Neurological Disorder	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	No Info Give; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; She is having falls on a regular basis, due to decrease in her lower extremity strength and having difficulty feeling the floor underneath her. In the past week, she has wrecked her car twice due to not being able to appropriately feel the foot pedals. Sh; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	PATIENT HAS HAD NO IMPROVEMENT AFTER MULTIPLE TRIALS OF THINGS TO TRY. NEEDING MRI TO SEE WHAT THE PROBLEM/CAUSE OF HIS PAIN; 02/22/2022; There has been treatment or conservative therapy.; CHRONIC LOW BACK PAIN ;THORACIC PAIN ;RADICULAR PAIN BLE NEUROPATHY LUMBAR/THORACIC DEGENERATIVE DISC DISEASE; 8 WEEKS OF PHYSICAL THERAPY AND HOME EXERCISES. PATIENT HAS GONE THROUGH ROUNDS OF NSAIDS, STEROIDS FOR PAIN WITH NO IMPROVEMENT; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Prior CTs showed abnormal findings; Pt has had chronic back pain for several years.; There has been treatment or conservative therapy.; Chronic back pain and lumbar paraspin tenderness; Pt has seen pain management specialist for several years.; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	pt is experiencing low back pain, mid back pain, and abnormal reflexes. pt also has multiple sclerosis.; 10/10/2021; There has been treatment or conservative therapy.; neck pain, mid back pain and abnormal reflexes.; Pt, HEP, and medications; This study is being ordered for Multiple Sclerosis	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Second clinic visit for same complaint the patient states that the pain was radiating into her left shoulder. Complaints of weakness, dizziness and lightheadedness.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	severe back pain; 4/29/2022; There has been treatment or conservative therapy.; back pain; Physical therapy, medication management; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; It is not known if the patient has new signs or symptoms of bladder or bowel dysfunction.; It is unknown if there is recent evidence of a thoracic spine fracture.; There is weakness.; Thoracic degenerative disc disease	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; It is not known if the patient has new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; It is not known if there is weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is reflex abnormality.; Thoracic back: Spasms, tenderness and bony tenderness present. Decreased range of motion.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; Patient complaint.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; Pt is having weakness in bilateral legs and tingling with some numbness as well. Pt has had procedures and see pain management but the pain and flare up continues	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; weakness in thoracic area	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has not seen the doctor more then once for these symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; It is not known was medications were used in treatment.; It is not known if the patient has completed 6 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 6 weeks.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; It is not known was medications were used in treatment.; The patient has completed 6 weeks or more of Chiropractic care.	Apr-Jun 2022 1
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; It is not known if the patient has completed 6 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 6 weeks.	Apr-Jun 2022 1
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 6 weeks.	Apr-Jun 2022 2
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.	Apr-Jun 2022 2
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.	Apr-Jun 2022 1
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Known or Suspected Infection or abscess; It is not known if there is laboratory evidence of osteomyelitis.; It is not known if there is laboratory or x-ray evidence of meningitis.; There is laboratory or x-ray evidence of an infected disc, septic arthritis, or "discitis".	Apr-Jun 2022 1
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 2022 1
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 2022 1
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; re weakness and spasm on r rhomboid and left si pain now	Apr-Jun 2022 1
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; scoliosis	Apr-Jun 2022 1

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; It is not know if the patient has seen the doctor more then once for these symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has NOT had back pain for over 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Suspected Tumor with or without Metastasis; There is evidence of tumor or metastasis on a bone scan or x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Suspected Tumor with or without Metastasis; There is no evidence of tumor or metastasis on a bone scan or x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Trauma or recent injury; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; other medications as listed.; Naproxen; It is not known if the patient has completed 6 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for a neurological disorder.; 2020; It is not known if there has been any treatment or conservative therapy.; Chronic Pain; Spasms; blurred vision; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Weakness and pain to the left side of the body worsening since MVA in 02/2022.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	WEAKNESS.; This study is being ordered for a neurological disorder.; WEAKNESS; There has been treatment or conservative therapy.; WEAKNESS; WEAKNESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	xrays done 09/17/21 thoracic and lumbar were normal; 09/13/21; There has been treatment or conservative therapy.; Mid and lower back pain worse with bending or lifting that awakens him most nights. He has been having to sleep in floor with legs elevated to get relief. On physical exam, tenderness note to distal thoracic and lumbar spine. Celebrex prescribed 04/13/22.; steroids (prednisone), muscle relaxers, OTC pain relievers, OTC pain relief topical, instructed to use warm moist heat and gentle stretching, and home inversion table.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; 06/15/2017; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; He has lumbar radiculopathy and worsening left hip pain; There has been treatment or conservative therapy.; lumbar pain and left hip pain; ice and heat, home exercises, analgesics; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	.; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	abnormal xray of T-spine and L-spine; approx. 2 years ago; There has been treatment or conservative therapy.; back pain; medications; This study is being ordered for Other chronic pain; 11/18/2021; There has been treatment or conservative therapy.; low back pain and neck pain chronic pain; physical therapy medication home exercises; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Complex Regional Pain Syndrome Type; long standing history; There has been treatment or conservative therapy.; Mid-back pain ;Back pain or radiculopathy; multiple treatments including PT, Sympathetic nerve blocks, multiple medications, etc. She has not had any improvement.; This study is being ordered for Other	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	CT report 04/12/22: T11-T12 Extreme posterior lateral disc herniation which results in severe narrowing of the left neural foramen. L1-L2 Mild posterior disc osteophyte complex. Mild narrowing of the left neural foramen. L3-L4 mild posterior disc bulge of; Unknown; There has been treatment or conservative therapy.; Severe pain radiating down both legs; Prescription strength medications; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 04/05/2022; There has not been any treatment or conservative therapy.; LBP RADIATING TO RECTAL AREA, URINARY URGENCY.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Follow-up needed to make sure diagnosis is not worsening.; 2018; There has not been any treatment or conservative therapy.; No symptoms, incidental finding on x-ray that needs follow-up.; This study is being ordered for Congenital Anomaly	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	HX OF DISECTOMY ON LUMBAR, NUMBNESS TINGLING, GAIT ABN.; This study is being ordered for trauma or injury.; 12/22/2021; There has been treatment or conservative therapy.; Pt has severe low back pain and hip pain.; Pt has chiro, muscle relaxers.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Low back pain ;sacrum pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/17/2022; There has been treatment or conservative therapy.; low back pain ;sacrum pain; PT and medication ;Lifestyle adjustment; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Low back pain, unspecified   M5450.; This study is being ordered for trauma or injury.; 03/07/2022; There has been treatment or conservative therapy.; Low back pain, unspecified and right knee pain; PHYSICAL THERAPY, NSAIDS, BRACING, INMOBILIZATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	multilevel degenerative disc disease on x ray; more than 6 months ago; There has been treatment or conservative therapy.; the pain in her neck and back has now become more numbness; Medications, muscle relaxers, rest; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	N/A; This study is being ordered for a neurological disorder.; 04/21/22; There has been treatment or conservative therapy.; N/A; Med change; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	No Info Give; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; She is having falls on a regular basis, due to decrease in her lower extremity strength and having difficulty feeling the floor underneath her. In the past week, she has wrecked her car twice due to not being able to appropriately feel the foot pedals. Sh; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	none given; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; none given; It is not known if there has been any treatment or conservative therapy.; none given; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Patient reports majority of her pain is in right leg. Patient has a tremor to the right leg that comes and goes. Patient has had weakness and unstable gait for about 4-6 months. Patients blood pressure has been going up and down. Patient went to Baylor du; This study is being ordered for a neurological disorder.; November 2021; There has been treatment or conservative therapy.; Pt. having tremors, pain to right leg, trouble walking, weight loss, was dx'd with Parkinsons in November; has weakness, unstable gait, is hyperreflexic.; Medications, first time seen in this office; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	per X-ray of C-spine there are degenerative changes of disc space narrowing around a fusion he had. Minimal degenerative changes on L-spine and per radiologist if symptoms persist an MTI is recommended; 04/12/2022; It is not known if there has been any treatment or conservative therapy.; Cervical pain, lumbago with sciatica on right side, anesthesia of skin, paresthesia of skin; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	previously had an ultrasound at wadley which read to have an MRI of the area if pain or area continues to swell. She has a over 6 month hx of pain and swelling in the R gluteal and upper R thigh. For back pain, cool sensation and tingling going down the R; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; oct 2021; There has been treatment or conservative therapy.; reports a cold sensation in her lumbar spine on the R side and has shooting electrical pain that goes down the right leg.She also has a mass on the right gluteal and into her thigh; rest, ice, elevation, pain medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Prior CTs showed abnormal findings; Pt has had chronic back pain for several years.; There has been treatment or conservative therapy.; Chronic back pain and lumbar paraspinal tenderness; Pt has seen pain management specialist for several years.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Provider would like to refer patient to neurosurgery, but they won't see patient unless they have MRI images from within the last 6 months.; more than 10 years ago; There has been treatment or conservative therapy.; neck pain causing limited range of motion, back pain, numbness in legs; Pt has tried multiple OTC medications w/no relief. He's tried Rx pain medication and muscle relaxers w/some relief. He's had epidural steroid injections and sacroiliac joint injections giving some temporary relief.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Pt. denies any heavy lifting. Pt. reports low back stabbing pain. Pt. also reports muscle spasms with numbness and tingling down both legs into the feet. This pain is constant.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	RULE OUT HERNIATED NUCLEUS PULPOSUS (HNP); This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; LEFT ARM WEAKNESS;LEFT ARM PAIN;NECK PAIN;LOWER BACK PAIN;PERSONAL HISTORY OF OSTEOPOROSIS FRACTURE; PHYSICAL THERAPY;MEDICATION THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Second clinic visit for same complaint the patient states that the pain was radiating into her left shoulder. Complaints of weakness, dizziness and lightheadedness.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinical; see attached clinical; It is not known if there has been any treatment or conservative therapy.; see attached clinical; This study is being ordered for Other	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	severe back pain; 4/29/2022; There has been treatment or conservative therapy.; back pain; Physical therapy, medication management; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	test needed for patient to continue CESI, LESI and PT; 2017; There has been treatment or conservative therapy.; neck pain, low back pain, subjective leg weakness, sciatica, previous urinary incontinence; CESI, LESI, PT; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	the pain is worsening while on chronic pain management.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; There has been treatment or conservative therapy.; Low back pain with radiculopathy and bilateral hip pain.; Patient is on pain management; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; It is unknown if the patient has acute or chronic back pain.; This study is being requested for Trauma or recent injury	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; None of the above has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Abnormal Reflexes	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for None of the above	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Trauma or recent injury	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	78 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 23 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 22 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 16 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 72 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has Other; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Cannot agree/affirm; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	to see if patient needs injections or surgery. X; Patient is being seen today in clinic for new onset foot drop; There has not been any treatment or conservative therapy.; Patient has new foot drop, tingling on right leg, tingling down right arm; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; First week of June; There has not been any treatment or conservative therapy.; Altered gait, neck pain and right-sided back pain with sciatica; xrays reveal degenerative changes and other abnormalities.; This study is being ordered for Other	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for a neurological disorder.; 3/27/22; There has been treatment or conservative therapy.; neck and shoulder pain;lumbar pain with lower extremity radiculopathy; Stretching;OTC anti inflammatory medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for a neurological disorder.; 2020; It is not known if there has been any treatment or conservative therapy.; Chronic Pain;Spasms;blurred vision; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for trauma or injury.; 5/14/2022; There has not been any treatment or conservative therapy.; patient is having a moderate amount of pain, 6/10 on pain scale.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	UNKNOWN; UNKNOWN; There has been treatment or conservative therapy.; UNKNOWN; PHYSICAL THERAPY; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Weakness and pain to the left side of the body worsening since MVA in 02/2022.; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	xrays done 09/17/21 thoracic and lumbar were normal; 09/13/21; There has been treatment or conservative therapy.; Mid and lower back pain worse with bending or lifting that awakens him most nights. He has been having to sleep in floor with legs elevated to get relief. On physical exam, tenderness note to distal thoracic and lumbar spine. Celebrex prescribed 04/13/22.; steroids (prednisone), muscle relaxers, OTC pain relievers, OTC pain relief topical, instructed to use warm moist heat and gentle stretching, and home inversion table.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72192	Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered due to known or suspected infection.; "The ordering physician is NOT a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; "There are NO active, clinical findings or endoscopic findings of Crohn's disease, ulcerative colitis, or diverticulitis."; "There are no radiographical or ultrasound findings consistent with abnormal fluid collection, pelvic abscess, pelvic inflammation or ascites."; "There are no physical findings or abnormal blood work consistent with peritonitis, pelvic inflammatory disease, or appendicitis."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72192	Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	CHRONIC PAIN IN RIGHT HIP; This study is being ordered for some other reason than the choices given.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72192	Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/05/2022; There has not been any treatment or conservative therapy.; abd pain/rt lower quad pain/pelvic pain/abnormal US/hematuria /enlarged uterus; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72192	Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	Lumbar radiculopathy; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Lumbar radiculopathy; There has been treatment or conservative therapy.; Lumbar radiculopathy; Lumbar radiculopathy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72192	Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered because of a suspicious mass/ tumor.; "The patient has had a pelvic ultrasound, barium, CT, or MR study."; This is a request for a Pelvis CT.; There are documented physical findings (painless hematuria, etc.) consistent with an abdominal mass or tumor.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	abnormal ct scan. abnormal weight loss.; This study is being ordered for Inflammatory/ Infectious Disease.; 1 year ago; There has been treatment or conservative therapy.; Reports continued dizziness, diarrhea, loss of appetite, fatigue, and muscle spasm. Pt also reports 35lb weight loss over the past 3 months.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 04/05/2022; There has not been any treatment or conservative therapy.; LBP RADIATING TO RECTAL AREA, URINARY URGENCY.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &t; 3/28/2022; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &t; nausea and abdominal pain; Describe treatment / conservative therapy here - or Type In Unknown If No Info Given &t; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Low back pain ;sacrum pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/17/2022; There has been treatment or conservative therapy.; low back pain ;sacrum pain; PT and medication ;Lifestyle adjustment; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Pt has been having chronic hip and lower back pain for months now. Has tried and failed PT and pain management has not been effective.; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for arthritis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	WEAKNESS.; This study is being ordered for a neurological disorder.; WEAKNESS; There has been treatment or conservative therapy.; WEAKNESS; WEAKNESS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	xray findings; This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73200	Computed tomography, upper extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73200	Computed tomography, upper extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is not suspicion of upper extremity bone or joint infection.; The ordering physician is not an orthopedist or rheumatologist.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73206	Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the upper extremity.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is not a history of upper extremity trauma or injury.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Acute Wrist pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given Describe treatment / conservative therapy here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; Shoulder pain, Decreased ROM of right shoulder.; Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 4/2021; There has been treatment or conservative therapy.; Pt not able to grasp anything , limited range of motion in wrist and elbow area.; Pt has done PO medication , home therapy , and he has had an injection .; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; Unknown; There has been treatment or conservative therapy.; Shoulder pain; PT, medications.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	evere pain in r elbow. not healing; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	please see clinicals; The pain is described as chronic; The member has not failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	She has been wearing a splint on her right thumb. She did light duty at work for 2 or 3 weeks and then she has been on vacation the last week and a half. Her job requires her to use a knife to cut sweet potatoes. She could not do that with her right hand; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy.; The patient has been treated with medication.; It is not known if the physician has directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; .	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy.; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy.; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; Descovy ;Gabapentin Norvir ;Reyataz;Back Support	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy.; The patient has been treated with medication.; The patient received joint injection(s).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy.; This is NOT a Medicare member.	Apr-Jun 10 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; It is not known if the patient has completed 4 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; Injections	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; It is not known if the patient has completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; ; The patient received medication other than joint injections(s) or oral analgesics.;	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has completed 4 weeks or more of Chiropractic care.; The patient received oral analgesics.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	3	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; Medication List;As of 4/28/2022 10:23 AM;;amiodipine besylate 10 mg Oral DAILY;;gabapentin 400 mg Oral 3 TIMES DAILY;;hydrochlorothiazide 25 mg Oral DAILY;;hydrocodone/acetaminophen 7.5-325 mg 1 tablet Oral EVERY 8 HOURS PRN;;lisinopril 40 mg O	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	5	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has not been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has not directed conservative treatment for the past 4 weeks.	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; It is not known if there is a suspicion of tendon, ligament, rotator cuff injury, or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; It is not known if there is a suspicion of fracture not adequately determined by x-ray.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not known if surgery or arthroscopy is scheduled in the next 4 weeks.	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	19	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	3	Apr-2022	Jun-2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; There is a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has not been treated with medication.; The patient has completed 4 weeks or more of Chiropractic care.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; The member has a recent injury.; There is a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	UNKNOWN; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for a neurological disorder.; 3/27/22; There has been treatment or conservative therapy.; neck and shoulder pain;lumbar pain with lower extremity radiculopathy; Stretching;OTC anti inflammatory medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for trauma or injury.; 4/2022; There has been treatment or conservative therapy.; Mass in muscle of upper extremity, loss of range of motion, extreme pain; medication, immobilizer; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is not a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a preoperative or recent postoperative evaluation.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient does not have a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2 MONTHS AGO; There has been treatment or conservative therapy.; PAIN IN BOTH KNEES; HOME EXERCISES, PAIN MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 1/25/2022; There has been treatment or conservative therapy.; Pain.; Patient has had steoped on a nail and been treating puncture wound. Also healed but have continued ,pain, wanted to make sure this is no infection before discharging from dr service.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Low back pain, unspecified   M5450.; This study is being ordered for trauma or injury.; 03/07/2022; There has been treatment or conservative therapy.; Low back pain, unspecified and right knee pain; PHYSICAL THERAPY, NSAIDS, BRACING, INMOBILIZATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	none; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 4/5/2022; There has been treatment or conservative therapy.; sharp pain in knee, pain in foot, weakness; medication, home exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	previously had an ultrasound at wadley which read to have an MRI of the area if pain or area continues to swell. She has a over 6 month hx of pain and swelling in the R gluteal and upper R thigh. For back pain, cool sensation and tingling going down the R; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; oct 2021; There has been treatment or conservative therapy.; reports a cold sensation in her lumbar spine on the R side and has shooting electrical pain that goes down the right leg.She also has a mass on the right gluteal and into her thigh; rest, ice, elevation, pain medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	There is a pulsatile mass.; "There is no evidence of tumor or mass from a previous exam, plain film, ultrasound, or previous CT or MRI."; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; It is not known if surgery is planned for in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for known dislocation.; It is unknown if the dislocation is reducible.; It is unknown if the dislocation has recurred.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They did not have 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has not had a recent bone scan.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a protective boot for at least 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with a protective boot for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with orthotics for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with something other than crutches, a protective boot, walking cast, immobilization, orthopedics, anti-inflammatory medication or a cast for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for known or suspected septic arthritis or osteomyelitis.; A plain x-ray of the area been done.; The results of the plain film x-ray were abnormal.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for neurooma.; The patient has had foot pain for over 4 weeks.; The patient has been treated with immobilization for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered to rule out tarsal coalition.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	Apr-Jun 8 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; Prior surgery was noted as an indication for knee imaging; The surgery was NOT done in the past 90 days.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; Suspicion of infection was noted as an indication for knee imaging	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; 'None of the above' were noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Effusion with blood (Hemarthrosis) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee immobilizer; The ordering MDs specialty is NOT Orthopedics.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Wheel chair; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with an Ace bandage; The ordering MDs specialty is NOT Orthopedics.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Lachmann's test or "drawer" sign (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Blood or abnormal fluid in the knee joint was noted as an indication for knee imaging	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	9	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with a Knee immobilizer; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; It is unknown if there is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; It is not known if there is a suspicion of fracture not adequately determined by x-ray.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is not taking antibiotics.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; 5/6/22; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; He has lumbar radiculopathy and worsening left hip pain; There has been treatment or conservative therapy.; lumbar pain and left hip pain; ice and heat, home exercises, analgesics; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for Vascular Disease.; 4/25/2022; There has been treatment or conservative therapy.; The Patient HAS Hip Pain and; Ct; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	none given; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; none given; It is not known if there has been any treatment or conservative therapy.; none given; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	the pain is worsening while on chronic pain management.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; There has been treatment or conservative therapy.; Low back pain with radiculopathy and bilateral hip pain.; Patient is on pain management; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	6	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has not failed a 4 week course of conservative management in the past 3 months.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is not due to a recent injury, old injury, Chronic Hip Pain or a Mass.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is not for hip pain.; The study is for infection or inflammation.; There are physical exam findings, laboratory results, other imaging including bone scan or ultrasound confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is not planned for in the next 4 weeks.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	73725	Magnetic resonance angiography, lower extremity, with or without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	History of cancer; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for post-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study being ordered for a palpable, observed or imaged upper abdominal mass.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a kidney/ureteral stone.; It is not known if this patient is experiencing hematuria.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a kidney/ureteral stone.; This patient is experiencing hematuria.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a kidney/ureteral stone.; This patient is not experiencing hematuria.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient does not have new symptoms including hematuria, new lab results or other imaging studies including ultrasound, doppler or x-ray (plain film) findings, suspicion of an adrenal mass or suspicion of a renal mass.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient has new symptoms including hematuria.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Diverticulitis.; Yes this is a request for a Diagnostic CT	5	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, abscess, colitis and inflammatory bowel disease.; There are NO abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; There are findings that confirm hepatitis C.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, abscess, colitis and inflammatory bowel disease.; There are NO abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; There are no findings that confirm hepatitis C.; Yes this is a request for a Diagnostic CT	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are clinical findings or indications of unexplained weight loss of greater than 10% body weight in 1 month; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are clinical findings or indications of unexplained weight loss of greater than 10% body weight in 1 month; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are no findings of Hematuria, Lymphadenopathy, weight loss, abdominal pain, diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	20	2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for organ enlargement.; The spleen is enlarged.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdomen.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/1/2022; There has been treatment or conservative therapy.; swollen lymph nodes and neck pain; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	05/03/2022; There has been treatment or conservative therapy.; diarrhea; Colonoscopy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	05/10/2022; There has been treatment or conservative therapy.; hematuria, gastric pain; PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	05/17/2022; There has not been any treatment or conservative therapy.; Weight loss, severe cough, bronchitis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	05/20/2022; There has not been any treatment or conservative therapy.; abnormal weight loss, coughing abdominal pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	12/10/2021; It is not known if there has been any treatment or conservative therapy.; CHEST PAIN, UPPER ABD PAIN AND SHORTNESS OF BREATH; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	A FEW MONTHS; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given DIFFERENT TEST; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	Enter date of initial onset here - or Type In Unknown If No Info Given &t; 2021; It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	evaluation for possible cancer given significant weight loss in past six months; There has not been any treatment or conservative therapy.; 40 pound unintentional weight loss over past 3 months; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	Pt has had significant weight loss over the past 6 months. Her BMI is currently 18 without explanation; There has been treatment or conservative therapy.; Weight loss and weakness; Increase caloric intake; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for ketones; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were normal.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; It is unknown if there has been a physical exam.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 20 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Recurrent unilateral inguinal hernia with obstruction and without gangrene; it is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Weight loss, bloating; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); abdomen is distended; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); BLOOD AND MUCUS IN STOOL; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); CONCERN FOR RENAL ARTERY STENOSIS; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); DHEA, Prolactin elevated; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Follow up imaging required to document stability of mesenteric adenitis, prominent mesenteric lymph nodes.; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); hernia evaluation; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Patient has a history of polycystic kidney disease and is having thoracic back pain that started 3 days ago.; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); PATIENT HAS DIASTASIS OF RECTUS ABDOMINIS; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); PATIENT IS HAVING DYSURIA, URGE INCONTINENCE AND LOW BACK PAIN; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is organ enlargement.; There is not ultrasound or plain film evidence of an abdominal organ enlargement.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has been completed.; The results of the contrast/barium x-ray were normal.; The patient did not have an endoscopy.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has NOT been completed.; The patient did not have an endoscopy.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	unintentional loss of weight over last 6 months; There has not been any treatment or conservative therapy.; pt has lost 10 pounds in the last six months, loss of appetite; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; There has not been any treatment or conservative therapy.; Kadarius continues to have multiples sores all over his body. He has seen dermatology and biopsies were taken but he was given no diagnosis as yet. He saw Hematology when his white count was low but it has now normalized. He continues to lose weight.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	abnormal ct scan. abnormal weight loss.; This study is being ordered for Inflammatory/ Infectious Disease.; 1 year ago; There has been treatment or conservative therapy.; Reports continued dizziness, diarrhea, loss of appetite, fatigue, and muscle spasm. Pt also reports 35lb weight loss over the past 3 months.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &gt; 3/28/2022; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &gt; nausea and abdominal pain; Describe treatment / conservative therapy here - or Type In Unknown if No Info Given &gt; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for follow-up.; The patient did NOT have chemotherapy, radiation therapy or surgery in the last 3 months.; They did NOT have an Abdomen MRI in the last 10 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	Radiology Services Denied Not Medically Necessary	Pt has worsening dysautonomia symptoms; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/03/2022; There has been treatment or conservative therapy.; Pt is having shortness of breath, tachycardia, chest pain, dizziness , weakness with worsening dysautonomia symptoms; Pt is on 2 liters oxygen nasal cannula due to hypoxemia, she is taking midodrine and diltazem; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	75571 Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Radiology Services Denied Not Medically Necessary	CORONARY ARTERY DISEASE INVOLVING NATIVE CORONARY ARTERY OF NATIVE HEART, ANGINA PRESENCE FURTHER TESTING TO POSSIBLY REFER TO CARDIOLOGY.; This is a request for a CT scan for evaluation of coronary calcification.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	75571 Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This is a request for a CT scan for evaluation of coronary calcification.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	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)	Radiology Services Denied Not Medically Necessary	; This is a request for CTA Coronary Arteries.; The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	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)	Radiology Services Denied Not Medically Necessary	possible stroke; This study is being ordered for Vascular Disease.; 1 month ago; There has not been any treatment or conservative therapy.; double vision, face drooping, chest pain, shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	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)	Radiology Services Denied Not Medically Necessary	This is a request for CTA Coronary Arteries.; The study is requested for known or suspected valve disorders.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Radiology Services Denied Not Medically Necessary	This patients lifetime risk is 17.2% chance of getting breast cancer; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	77078 Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	Radiology Services Denied Not Medically Necessary	This is a request for a Bone Density Study.; This patient had a bone mineral density study within the past 23 months.; This is a bone density study in a patient with clinical risk of osteoporosis or osteopenia.; The patient has not been on steroid therapy for more than 3 months.; This is not a repeat study due to a change in treatment or a change in symptoms of osteoporosis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	77078 Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	Radiology Services Denied Not Medically Necessary	This is a request for a Bone Density Study.; This patient has not had a bone mineral density study within the past 23 months.; This is a bone density study in a patient with clinical risk of osteoporosis or osteopenia.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	77078 Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	Radiology Services Denied Not Medically Necessary	This is a request for a Bone Density Study.; Unknown if this patient had a bone mineral density study within the past 23 months.; This is a bone density study in a patient with clinical risk of osteoporosis or osteopenia.; The patient has not been on steroid therapy for more than 3 months.; This is not a repeat study due to a change in treatment or a change in symptoms of osteoporosis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	patient is having chest pain, she is a current smoker with a strong family history of heart disease.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Pt had an abnormal EKG while in the office; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; It is not known if there are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	PT HAS HTN, KNOWN CAD, DYSPNEA ON EXERTION, AND LEFT ARM PAIN; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	The patient did NOT have a prior CABG.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block; The patient has NOT had a prior stent; The patient does NOT have documented ejection fraction on prior TTE (Transthoracic Echocardiogram) of less than 40%	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Assessment of risk for a patient without symptoms or history of ischemic/coronary artery disease best describes the patients clinical presentation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; 05/12/2022; There has been treatment or conservative therapy.; SOB, chest pain; Chest x-ray; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This nodule is New (recently diagnosed); The nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of an abnormal heart rhythm.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of possible or known pulmonary embolism.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of possible or known pulmonary embolism.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Moderate stenosis or moderate regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been less than 1, 2 or 3 years since the last Transthoracic Echocardiogram (TTE) was completed; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are NO new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; Something other than Myocardial Perfusion Imaging, Exercise Treadmill Testing, Stress Echocardiography, or EKG has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; The ordering provider's specialty is NOT Rheumatology.; This study is being ordered for none of the above or don't know.; The member has NOT tested positive for Coronavirus (Covid 19)	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; It is unknown if this is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Shortness of breath is not related to any of the listed indications.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; This study is NOT being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of cardiac arrhythmias; It is unknown if this study is being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; It is unknown if there been a change in clinical status since the last echocardiogram.; This request is for initial evaluation of a murmur.; The murmur is NOT grade III (3) or greater.; It is unknown if there is clinical symptoms supporting a suspicion of structural heart disease.; This is a request for follow up of a known murmur.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; There has NOT been a change in clinical status since the last echocardiogram.; This request is for initial evaluation of a murmur.; The murmur is NOT grade III (3) or greater.; It is unknown if there is clinical symptoms supporting a suspicion of structural heart disease.; This is a request for follow up of a known murmur.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; It is unknown if there is clinical symptoms supporting a suspicion of structural heart disease.; This is NOT a request for follow up of a known murmur.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; There are NOT clinical symptoms supporting a suspicion of structural heart disease.; This is NOT a request for follow up of a known murmur.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; The murmur is NOT grade III (3) or greater.; There are NOT clinical symptoms supporting a suspicion of structural heart disease.; This is NOT a request for follow up of a known murmur.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; It is unknown if this is being ordered for initial diagnosis of congenital heart disease, Annual follow up of congenital heart disease or Evaluation of change of clinical status.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; It is unknown if there been a change in clinical status since the last echocardiogram.; It is unknown if this is for the initial evaluation of heart failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; It is unknown if the patient has a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Cannot agree/affirm; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; Assessment of risk for a patient without symptoms or history of ischemic/coronary artery disease best describes the patients clinical presentation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	General/Family Practice	Disapproval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	Radiology Services Denied Not Medically Necessary	will fax; This is a request for MRCP.; There is no reason why the patient cannot have an ERCP.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has fatigue or malaise	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; Abnormal mass in the chest, chest wall, or lung is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)		This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material		This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material		This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences		The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	74150 Computed tomography, abdomen; without contrast material		This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)		This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms was more than 6 months ago.;; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; Other cardiac stress testing was completed More than 6 months ago; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is no known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	Neck pain, chronic, degenerative changes on xray; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has not seen the doctor more then once for these symptoms.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Geriatrics	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	37-year-old male presents emerged part with complaint of chest pain. Left-sided chest pain started last night. The pain is sharp, nothing makes it worse or better. He is not short of breath.;Nausea vomiting or diaphoresis. He had a heart catheterizat; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29 ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	71250 Computed tomography, thorax; without contrast material			1 2022 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	71250	Computed tomography, thorax; without contrast material	10/12/2021; There has been treatment or conservative therapy.; mild pelvic cramping and pressure as well as vaginal spotting, worsened with;lifting; maintenance trastuzumab; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	71250	Computed tomography, thorax; without contrast material	11/03/2021; There has been treatment or conservative therapy.; Ovarian cancer; Total abdominal hysterectomy, bilateral salpingo-oophorectomy.;2. Bilateral pelvic lower aortic lymphadenectomy.;3. Appendectomy.;4. Omentectomy;;adjuvant chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	71250	Computed tomography, thorax; without contrast material	Ovarian cancer, initial staging ;ovarian cancer; There has been treatment or conservative therapy.; Ovarian cancer, initial staging ;ovarian cancer; chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	71250	Computed tomography, thorax; without contrast material	yolk sac tumor of ovary on chemo; please evaluate disease response; There has been treatment or conservative therapy.; yolk sac tumor of ovary on chemo; please evaluate disease response; yolk sac tumor of ovary on chemo; please evaluate disease response; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	rule out recurrent cervical cancer; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A tumor or mass was noted on previous imaging.; An abnormality was found in the ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Will order MRI for evaluation of residual disease and refer to REI as treatments will likely affect future fertility. Plan to submit case to tumor board.; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease. ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	10/12/2021; There has been treatment or conservative therapy.; mild pelvic cramping and pressure as well as vaginal spotting, worsened with;lifting; maintenance trastuzumab; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	11/03/2021; There has been treatment or conservative therapy.; Ovarian cancer; Total abdominal hysterectomy, bilateral salpingo-oophorectomy.;2. Bilateral pelvic lower aortic lymphadenectomy.;3. Appendectomy.;4. Omentectomy;;adjuvant chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	Ovarian cancer, initial staging ;ovarian cancer; There has been treatment or conservative therapy.; Ovarian cancer, initial staging ;ovarian cancer; chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	Apr-Jun 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is known tumor.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	yolk sac tumor of ovary on chemo; please evaluate disease response; There has been treatment or conservative therapy.; yolk sac tumor of ovary on chemo; please evaluate disease response; yolk sac tumor of ovary on chemo; please evaluate disease response; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Cervical Cancer.; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Cervical Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is NOT for prolapsed mitral valve, suspected valve disease, new or changing symptoms of valve disease, annual review of known valve disease, initial evaluation of artificial heart valves or annual re-eval of artificial heart valves.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Disapproval	71250 Computed tomography, thorax; without contrast material	5/2/22; There has not been any treatment or conservative therapy.; RECTAL BLEEDING; ABDOMINAL AND PELVIC PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Disapproval	71250 Computed tomography, thorax; without contrast material	10 years ago; There has been treatment or conservative therapy.; cervical cancer; chemotherapy;radiation; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	5/2/22; There has not been any treatment or conservative therapy.; RECTAL BLEEDING; ABDOMINAL AND PELVIC PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	10 years ago; There has been treatment or conservative therapy.; cervical cancer; chemotherapy;radiation; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for ketones.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Gynecologic Oncology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		METASTATIC BREAST CANCER; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		restaging of metastatic renal cancer; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 21 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a history of cancer.; Headache best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a known tumor outside the brain.; Known or suspected tumor best describes the reason that I have requested this test.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are NO documented neurologic findings suggesting a primary brain tumor.; Known or suspected tumor best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70486	Computed tomography, maxillofacial area; without contrast material		There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is not being ordered for trauma, tumor, sinusitis, osteomyelitis, pre operative or a post operative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70490 Computed tomography, soft tissue neck; without contrast material	; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70490 Computed tomography, soft tissue neck; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 26 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70490 Computed tomography, soft tissue neck; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 20 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	Apr-Jun 17 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was done.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was done.; The patient has been diagnosed with cancer.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was done.; The patient has NOT been diagnosed with cancer.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is not an immediate family history of aneurysm.; The patient has a known aneurysm.; This is a request for a Brain MRA.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	This study is being ordered for Vascular Disease.; 4/29/2021; There has been treatment or conservative therapy.; There was no symptoms, silent infarcts was found on 4/29/21 on the MRI/MRA.; Patient was started on Hydroxyurea.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology ; This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is not presenting with a sudden change in severity, associated with exertion, or a mental status change.; There are not recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.; It is not known if there is a family history (parent, sibling or child of the patient) of AVM (arteriovenous malformation).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; There are not recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.; There is not a new and sudden onset of headache (less than 1 week) not improved by pain medications.; The tumor is not a pituitary tumor or pituitary adenoma.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	CA OF MESENTERY METS WITH FATIUGE, ABNORMAL PET SCAN, AND MEMORY LOSS.; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results completed.; The lab results were normal; The patient is experiencing fatigue or malaise.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; It is not known if a metabolic work-up done including urinalysis, electrolytes, and complete blood count with results completed.; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Non small cell lung cancer monitor; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results was not completed.; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient also having dizzy spells and balance problems within the last 2 years; This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is not presenting with a sudden change in severity, associated with exertion, or a mental status change.; There are not recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.; There is not a family history (parent, sibling or child of the patient) of AVM (arteriovenous malformation).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient has lung cancer that has metastasized to the brain. He has a 12mm tumor that is being followed. He is currently still on treatments but will be taking his last cycle of chemo soon. The oncologist would like to get a restaging of the tumor; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; There are not recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.; There is not a new and sudden onset of headache (less than 1 week) not improved by pain medications.; The tumor is not a pituitary tumor or pituitary adenoma.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 15 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Chronic headache, longer than one month describes the headache's character.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; New onset within the past month describes the headache's character.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected blood vessel abnormality (AVM, aneurysm) with documented new or changing signs and or symptoms best describes the reason that I have requested this test.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Known brain tumor best describes the patient's tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Known tumor outside the brain best describes the patient's tumor.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Suspected brain tumor best describes the patient's tumor.; There are NO documented neurologic findings suggesting a primary brain tumor.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is presenting with a sudden change in severity, associated with exertion, or a mental status change.	7	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as sudden and severe.; There recent neurological deficits on exam such as one sided weakness, speech impairments or vision defects.	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; It is not known if the condition is associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results completed.; The lab results were abnormal; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is associated with headache, blurred or double vision or a change in sensation noted on exam.; The patient is experiencing dizziness.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is associated with headache, blurred or double vision or a change in sensation noted on exam.; The patient is experiencing vertigo	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results completed.; The lab results were abnormal; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of stroke or aneurysm; There are recent neurological symptoms such as one sided weakness, speech impairments, or vision defects.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has been completed to determine tumor tissue type.	52	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; There are recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.	7	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has NOT been a change in seizure pattern or a new seizure.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This study is being ordered for Vascular Disease.; 4/29/2021; There has been treatment or conservative therapy.; There was no symptoms, silent infarcts was found on 4/29/21 on the MRI/MRA.; Patient was started on Hydroxyurea; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	; "There is NO evidence of a lung, mediastinal or chest mass noted within the last 30 days."; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	; A Chest/Thorax CT is being ordered.; This study is being ordered for screening of lung cancer.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Restaging during ongoing treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	"The ordering physician IS a surgeon, pulmonologist or PCP ordering on behalf of a specialist who has seen the patient."; A Chest/Thorax CT is being ordered.; This study is being ordered for known or suspected inflammatory disease or pneumonia.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	"There IS evidence of a lung, mediastinal or chest mass noted within the last 30 days."; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	3 MONTH FOLLOW UP NEW 5 MM ENDOBRONCHIAL NODULE WITHIN THE RIGHT LOWER LOBE.; A Chest/Thorax CT is being ordered.; This study is being ordered for screening of lung cancer.; The patient had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	6mm nodule in right middle lobe; "There is NO evidence of a lung, mediastinal or chest mass noted within the last 30 days."; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for known tumor.; Yes this is a request for a Diagnostic CT	76	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for screening of lung cancer.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for screening of lung cancer.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for suspected pulmonary Embolus.; Yes this is a request for a Diagnostic CT	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	COUGH SHORTNESS OF BREATH AND FATIGUE HX OF THROMBOSIS AND EMBOLISM; A Chest/Thorax CT is being ordered.; The study is being ordered for none of the above.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	FOLLOW UP SOLITARY PULMONARY NODULE; A Chest/Thorax CT is being ordered.; The study is being ordered for none of the above.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	It is not known if there is radiologic evidence of non-resolving pneumonia.; It is not known if there is radiologic evidence of asbestosis.; ; "The ordering physician is NOT a surgeon, pulmonologist or PCP ordering on behalf of a specialist who has seen the patient."; "The caller doesn't know if there is radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; It is not known if there is radiologic evidence of a lung abscess or empyema.; It is not known if there is radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; A Chest/Thorax CT is being ordered.; This study is being ordered for known or suspected inflammatory disease or pneumonia.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	leukocytosis; A Chest/Thorax CT is being ordered.; The study is being ordered for none of the above.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	LINGULAR NODULE SEEN ON LOW DOSE LUNG SCREENING CT CHEST; A Chest/Thorax CT is being ordered.; This study is being ordered for screening of lung cancer.; The patient had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	Per 2/8/22 Chest CT: The ground glass nodule in the right upper lung has a more solid appearance now. This measures 13 mm. No additional lesions visualized. I would recommend a PET scan looking for increased activity. If positive, then biopsy could be; "There is NO evidence of a lung, mediastinal or chest mass noted within the last 30 days."; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	PULMONARY NODULE AND RIGHT MCA ANEURYSM 6 X 4.2 X 6 MM.; A Chest/Thorax CT is being ordered.; The study is being ordered for none of the above.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	PULMONARY NODULE NEW CHEST PAIN; A Chest/Thorax CT is being ordered.; The study is being ordered for none of the above.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	restaging of metastatic renal cancer; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Follow up treatment of Cancer, Metastatic disease, Malignancy	Apr-Jun 29 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	Apr-Jun 151 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	Apr-Jun 114 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	Apr-Jun 23 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 37 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71250	Computed tomography, thorax; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 45 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	This study is being ordered for a known tumor.; The ordering physician is an oncologist, surgeon, pulmonologist, or cardiologist.; This study is being ordered for follow-up.; The patient is undergoing active treatment for cancer.; This is a request for a chest MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72125 Computed tomography, cervical spine; without contrast material	she have some screws coming loose in her back and neck , she stated its starting to become very painful; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72125 Computed tomography, cervical spine; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72128 Computed tomography, thoracic spine; without contrast material	; This is a request for a thoracic spine CT.; There is no reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72128 Computed tomography, thoracic spine; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72131 Computed tomography, lumbar spine; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Known Tumor with or without metastasis; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Known diagnosis of Cancer, Metastatic disease, Malignancy	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Staging or Restaging of Cancer, Metastatic disease, Malignancy	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; Don't know describes the reason for requesting this procedure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is being ordered to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Follow up treatment of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Known diagnosis of Cancer, Metastatic disease, Malignancy	6	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Staging or Restaging of Cancer, Metastatic disease, Malignancy	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Known Tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; It is not known if the physician has directed conservative treatment for the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	METASTATIC BREAST CANCER; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is being ordered to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Follow up treatment of Cancer, Metastatic disease, Malignancy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Known diagnosis of Cancer, Metastatic disease, Malignancy	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This study is being ordered for Cancer/ Tumor/ Metastatic Disease; This request is for Staging or Restaging of Cancer, Metastatic disease, Malignancy	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; Something other than listed has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72192 Computed tomography, pelvis; without contrast material	The patient is not undergoing active treatment for cancer.; This study is being ordered for known tumor, cancer, mass, or rule-out metastasis.; "The ordering physician is an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This study is not being ordered for initial staging.; The patient is presenting new signs (e.g. lab findings or imaging) or symptoms; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72192 Computed tomography, pelvis; without contrast material	The patient is undergoing active treatment for cancer.; This study is being ordered for known tumor, cancer, mass, or rule-out metastasis.; "The ordering physician is an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This study is not being ordered for initial staging.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Anal Cancer (Gastrointestinal); This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	CT exam refers MRI exam for further evaluation.; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; Something other than a cyst, tumor or mass was found on previous imaging.; An abnormality was found in the ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	LUNG CANCER RIGHT HIP PAIN POSSIBLE LYTIC LESION; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Rectal cancer, staging, locoregional ;rectal cancer; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	RECTAL CANCER; This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	RESTAGING OF RECTAL CANCER; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for pelvic trauma or injury.; This is an evaluation of something other than the pelvic girdle, sacrum or the tail bone (coccyx).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73700	Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is suspicion of a lower extremity neoplasm, tumor or metastasis.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	There is a pulsatile mass.; "There is evidence of tumor or mass from a previous exam, plain film, ultrasound, or previous CT or MRI."; Non Joint is being requested.	3	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for a mass, tumor or cancer.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is not due to a recent injury, old injury, Chronic Hip Pain or a Mass.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74150 Computed tomography, abdomen; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	13	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study being ordered for new symptoms including hematuria, presenting with known cancer or tumor.; Yes this is a request for a Diagnostic CT	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study is ordered for something other than staging of a known tumor (not) prostate, known prostate CA with PSA<math>\geq 10</math>, abdominal mass, Retroperitoneal mass or new symptoms including hematuria with known CA or tumor.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; Yes, this is a request for follow up to a known tumor or abdominal cancer.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	6	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy, weight loss, abdominal pain, diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist ; There has been treatment or conservative therapy. ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; There has not been any treatment or conservative therapy. ; ; The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for None of the above; This study is being ordered for Other not listed	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	restaging of metastatic renal cancer; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Follow up treatment of Cancer, Metastatic disease, Malignancy	28	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	151	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	114	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	23	Apr-2022	Jun-2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	46	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if this study is being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This study being ordered for a concern of cancer such as for diagnosis or treatment.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is known tumor.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is known tumor.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Patient with cirrhosis of the liver with ascites and IDA. Patient required paracentesis on 6/7/22. Patient with 10 year history of heavy alcohol use.; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); You are required to insert a reason here. Gastroparesis, nausea vomiting; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is organ enlargement.; There is ultrasound or plain film evidence of an abdominal organ enlargement.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was abnormal.; The ultrasound showed something other than Gall Stones, Kidney/Renal cyst, Aneurysm or a Pelvis Mass.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 22 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for known or suspected infection.; There are NO physical findings or abnormal blood work consistent with peritonitis, pancreatitis or appendicitis.; There is active or clinical findings of ulcerative colitis, bowel inflammation or diverticulitis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for follow-up.; The patient did NOT have chemotherapy, radiation therapy or surgery in the last 3 months.; They did NOT have an Abdomen MRI in the last 10 months.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for follow-up.; The patient had chemotherapy, radiation therapy or surgery in the last 3 months.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a renal cyst.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a renal cyst.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; This study is NOT being ordered to evaluate an undescended testicle in a male.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	; This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are NOT benign lesions in the breast associated with an increased cancer risk.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; Yes, this is an individual who has known breast cancer in the contralateral (other) breast.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	77084 Magnetic resonance (eg, proton) imaging, bone marrow blood supply	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	77084 Magnetic resonance (eg, proton) imaging, bone marrow blood supply	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	6	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Fatigue;Shortness of breath with exertion;Intermittent angina;He reports multiple symptoms suspicious for cardiac dysfunction along with a strong family history of cardiac disease. We will proceed with a stress test at this time; he has been referred to; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Chemotherapy.; Chemotherapy has been initiated or completed.; "There is not a change in cardiac signs or symptoms (shortness of breath, etc.)"; The patient will be undergoing more chemotherapy.; The last MUGA scan was performed more than 3 months ago.; Trastuzumab therapy. Follow EF	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Chemotherapy.; Chemotherapy has been initiated or completed.; It is not known if there is a change in cardiac signs or symptoms.; The patient will be undergoing more chemotherapy.; The patient has not had a previous MUGA scan.; Need to know how the toxicity is affecting the heart before continuing.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Chemotherapy.; Chemotherapy has not been initiated or completed.; Chemotherapy is planned.;	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Chemotherapy.; Chemotherapy has not been initiated or completed.; Chemotherapy is planned.; Enter answer here - or Type In Unknown If No Info Given. &gt;	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Chemotherapy.; Chemotherapy has not been initiated or completed.; Chemotherapy is planned.; UNKNOWN	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for another solid tumor.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for another solid tumor.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for another solid tumor.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Cervical Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Cervical Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is not being ordered for None of the above.; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	Apr-Jun 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Ovarian or Esophageal Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; A biopsy substantiated the cancer type; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Melanoma.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the regional lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; More than 4 PET Scans have already been performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78813	Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a PET Scan with Dotatate (Gallium GA 68-Dotatate)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for an other solid tumor.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for an other solid tumor.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for an other solid tumor.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun





4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Prostate Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This PET Scan is being requested for None of the above or don't know; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a PET Scan with Dotatate (Gallium GA 68-Dotatate)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with Dotatate (Gallium GA 68-Dotatate)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with PSMA (Pylarify)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; It is unknown how many PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; A biopsy has NOT substantiated the cancer type; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; A biopsy substantiated the cancer type; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun













4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Colo-rectal Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Colo-rectal Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 3 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Colo-rectal Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; More than 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Breast Cancer.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the axillary lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; 1 PET Scans has already been performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for the above; A biopsy has NOT substantiated the cancer type; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is not being ordered for Cervical CA, Brain Cancer/Tumor or Mass, Thyroid CA or other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This study is being requested for Breast Cancer.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was NOT performed on the axillary lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is for a PET Scan with an Other Tracer	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is New (recently diagnosed); It is unknown if the nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is New (recently diagnosed); The nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is New (recently diagnosed); The nodule is NOT calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; The nodule is Between 8 mm AND 4cm; The patient has NOT had a prior PET Scan for this nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This Pet Scan is being requested for Other; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	BASELINE ECHO BEFORE CHEMO; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; It is unknown if the patient has a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	BASELINE FOR CHEMOTHERAPY; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Cardiotoxic Chemotherapy; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Echo with EF in Aug 2021 improved with Braftovi resumed.;- Ejection Fraction on 4/06/22 50-55%;- EKG today with no QT prolongation;- Continue BRAFTovi and MEKtovi as prescribed; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is NOT for prolapsed mitral valve, suspected valve disease, new or changing symptoms of valve disease, annual review of known valve disease, initial evaluation of artificial heart valves or annual re-eval of artificial heart valves.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Need test prior to chemotherapy.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Patient is getting ready to start chemotherapy for invasive ductal carcinoma. This is part of the treatment plan.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Patient on long tern use of cardiotoxic chemotherapy.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Patient with stage II triple negative breast cancer receiving paclitaxel, doxorubicin, and cyclophosphamid. Patient requires continued monitoring for LVEF.; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	PLEURAL EFFUSIONS; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Progressing lower extremity edema;- Repeat echo and 24 hr urine protein at this time.;- Continue lasix as prescribed by PCP, continue wearing compression stockings and keeping lower extremities elevated when resting; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is NOT for prolapsed mitral valve, suspected valve disease, new or changing symptoms of valve disease, annual review of known valve disease, initial evaluation of artificial heart valves or annual re-eval of artificial heart valves.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	PT HAS BREAST CANCER ON CHEMO TREATMENT WITH HYPERTENSION AND NEEDING AN ECHO TO CHECK CARDIAC OUTPUT WHILE BEING ON CHEMO; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is NOT for prolapsed mitral valve, suspected valve disease, new or changing symptoms of valve disease, annual review of known valve disease, initial evaluation of artificial heart valves or annual re-eval of artificial heart valves.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Hematologist/Oncologist; This study is being ordered for evaluation related to chemotherapy (initial evaluation or follow-up).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologis t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Mass.; This is for the initial evaluation of a cardiac mass.	3	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; The murmur is grade III (3) or greater.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is NOT for prolapsed mitral valve, suspected valve disease, new or changing symptoms of valve disease, annual review of known valve disease, initial evaluation of artificial heart valves or annual re-eval of artificial heart valves.	7	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has NOT been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	18	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	4	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	2	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	2	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	2	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a known tumor outside the brain.; Known or suspected tumor best describes the reason that I have requested this test.	2	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a suspected tumor outside the brain.; Known or suspected tumor best describes the reason that I have requested this test.	1	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematology t/Oncologist	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	Iron deficiency; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	There is not a suspicion of an infection or abscess.; This examination is being requested to evaluate lymphadenopathy or mass.; This is a request for an Orbit MRI.; There is not a history of orbit or face trauma or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Known tumor outside the brain best describes the patient's tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is presenting with a sudden change in severity, associated with exertion, or a mental status change. ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for None of the above; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for None of the above; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for known tumor.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Iron deficiency; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	January 2022; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	METASTATIC BREAST CANCER; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	5	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	This study is being ordered for a work-up of a suspicious mass.; There is radiographic or physical evidence of a lung or chest mass.; This is a request for a chest MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Known or suspected infection or abscess	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	72146	Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	CONSISTENTLY ABOVE NORMAL PSA. 11/22/2021 4.8 (0-4); 5-19-22 4.68 (0-4); This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for follow-up.; The study is requested to detect residual cancer after a course of treatment has been completed?	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	73700	Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is a mass adjacent to or near the hip.; "There is no history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for None of the above; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for None of the above; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	Iron deficiency; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	January 2022; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	METASTATIC BREAST CANCER; There are 4 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Follow up treatment of Cancer, Metastatic disease, Malignancy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is Hematologist/Oncologist; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); SPLENOMEGALY EVALUATE SPLEEN; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; It is not known if this is the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	74181	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for follow-up.; The patient did NOT have chemotherapy, radiation therapy or surgery in the last 3 months.; They had an Abdomen MRI in the last 10 months.; The patient is NOT presenting new signs or symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	75635	Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	77046	Magnetic resonance imaging, breast, without contrast material; unilateral	Radiology Services Denied Not Medically Necessary	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78472	Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	Radiology Services Denied Not Medically Necessary	This is a request for a MUGA scan.; This study is NOT being ordered for Chemotherapy, Known Cardiomyopathy/ Myocarditis, Suspected Cardiomyopathy/ Myocarditis, or Congestive Heart Failure.; Myxoid pleomorphic liposarcoma	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78813	Positron emission tomography (PET) imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78813	Positron emission tomography (PET) imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 1 PET Scans has already been performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78813	Positron emission tomography (PET) imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This would be the first PET Scan performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78813	Positron emission tomography (PET) imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Thyroid Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is not being ordered for None of the above.; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lung Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lung Cancer.; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lymphoma or Myeloma.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Melanoma.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Melanoma.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	It is unknown if a biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with PSMA (Pylarify)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; More than 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Ovarian or Esophageal Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Melanoma.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the regional lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Ovarian or Esophageal Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Prostate Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Colo-rectal Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; More than 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; More than 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Ovarian or Esophageal Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This nodule is Existing (stable, being followed with any modality); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This Pet Scan is being requested for Other; This is for a PET Scan with Dotatate (Gallium GA 68-Dotatate)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hematologist/Oncologist	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This Pet Scan is being requested for Other; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hospital	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hospital	Approval	72192 Computed tomography, pelvis; without contrast material		This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Hospital	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Hospital	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; It is not known if this is the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Industrial Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Industrial Medicine	Approval	73200 Computed tomography, upper extremity; without contrast material		This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is not suspicion of upper extremity bone or joint infection.; The ordering physician is not an orthopedist or rheumatologist.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Industrial Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)		This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	70450 Computed tomography, head or brain; without contrast material		This study is being ordered for a neurological disorder.; 04/05/22; There has been treatment or conservative therapy.; PERSISTENT VISUAL DISTURBANCE; PATIENT HAD CELLULITIS AND WAS GIVEN CONTINUED TREATMENT FOR THIS AND NOW HAS VISION CHANGE(ANTIBIOTIC THERAPY); The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		This study is being ordered for a neurological disorder.; 04/05/22; There has been treatment or conservative therapy.; PERSISTENT VISUAL DISTURBANCE; PATIENT HAD CELLULITIS AND WAS GIVEN CONTINUED TREATMENT FOR THIS AND NOW HAS VISION CHANGE(ANTIBIOTIC THERAPY); The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; An abnormal imaging (xray) finding led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	71250 Computed tomography, thorax; without contrast material		There is no radiologic evidence of mediastinal widening.; There is physical or radiologic evidence of a chest wall abnormality.; A Chest/Thorax CT is being ordered.; This study is being ordered for follow up trauma.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a foot MRI.; The study is being oordered for infection.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a foot MRI.; The study is being oordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	74150 Computed tomography, abdomen; without contrast material		This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are clinical findings or indications of Hematuria.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has been completed.; The results of the contrast/barium x-ray were normal.; The patient had an endoscopy.; The endoscopy was normal.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Infectious Diseases	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a foot CT.; The patient has not used a cane or crutches for greater than four weeks.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient does not have an abnormal plain film study of the foot other than arthritis.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has not been treated with anti-inflammatory medications in conjunction with this complaint.; This is not for pre-operative planning.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 04/23/22; There has been treatment or conservative therapy.; Dizziness, numbness, paralysis of left arm; medication, rest; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		see previous note; This study is being ordered for trauma or injury.; 05/15/2022; There has been treatment or conservative therapy.; loss conscience fatigue neck pain headache; insadist rest ice; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are NO recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness; This is NOT a follow up request for a known hemorrhage/hematoma or vascular abnormality	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a headache involving the back of the head and the patient is over 55 years old; Headache best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This study is being ordered for a neurological disorder.; 04/05/22; There has been treatment or conservative therapy.; PERSISTENT VISUAL DISTURBANCE; PATIENT HAD CELLULITIS AND WAS GIVEN CONTINUED TREATMENT FOR THIS AND NOW HAS VISION CHANGE(ANTIBIOTIC THERAPY); The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	This study is being ordered for a neurological disorder.; 04/05/22; There has been treatment or conservative therapy.; PERSISTENT VISUAL DISTURBANCE; PATIENT HAD CELLULITIS AND WAS GIVEN CONTINUED TREATMENT FOR THIS AND NOW HAS VISION CHANGE(ANTIBIOTIC THERAPY); The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70486 Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70486 Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is suspicion of neoplasm, tumor or metastasis.fct"; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for a neurological disorder.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for a neurological disorder.; Unknown; There has not been any treatment or conservative therapy.; Past aneurysm, Pt stated that his headaches are coming back. Pt stated that he is having Migraines once a week or sometimes several times a week. Pt usually takes Excedrin or BC Powder for relief.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Sees bright white light accompanied by blurred vision followed by left arm numbness. Happened 6 months ago and a week ago.; This study is being ordered for a neurological disorder.; Happened 1x ~6m ago and was only a few seconds. Occurred again ~1wk ago and again was a few min and then no residual sx; There has not been any treatment or conservative therapy.; L eye flash of light then L arm pain. Happened 1x ~6m ago and was only a few seconds. Occurred again ~1wk ago and again was a few min and then no residual sx. Before flet fine and then after back to herself. No new meds. No recent trauma or injury. ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the brain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for a neurological disorder.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for a neurological disorder.; Unknown; There has not been any treatment or conservative therapy.; Past aneurysm, Pt stated that his headaches are coming back. Pt stated that he is having Migraines once a week or sometimes several times a week. Pt usually takes Excedrin or BC Powder for relief.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Calcified plaque causing elevated velocities in the right carotid system. Further evaluation with CTA or MRA is recommended.; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Sees bright white light accompanied by blurred vision followed by left arm numbness. Happened 6 months ago and a week ago.; This study is being ordered for a neurological disorder.; Happened 1x ~6m ago and was only a few seconds. Occurred again ~1wk ago and again was a few min and then no residual sx; There has not been any treatment or conservative therapy.; L eye flash of light then L arm pain. Happened 1x ~6m ago and was only a few seconds. Occurred again ~1wk ago and again was a few min and then no residual sx. Before flet fine and then after back to herself. No new meds. No recent trauma or injury. ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	TIA (transient ischemic attack); This is a request for a Neck MR Angiography.; The patient has dizziness.; The patient had an onset of neurologic symptoms within the last two weeks.; The patient has NOT had an ultrasound (doppler) of the neck or carotid arteries.; It is unknown if the patient had carotid (neck) artery surgery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; New onset within the past month describes the headache's character.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have a sudden severe, chronic or recurring or a thunderclap headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has the inability to speak.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient had a memory assessment for cognitive impairment completed; The patient has normal results of B12, TSH and other metabolic labs	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment; The patient had labs completed, including B12, TSH (Thyroid-stimulating hormone), CBC (Complete Blood Count), and CMP (Comprehensive Metabolic Panel)	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a memory assessment for cognitive impairment completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; There has been a recent assessment of the patient's visual acuity.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; 'None of the above' are related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This study is being requested for 'none of the above'.; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This study is being requested for an unresolved cough; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This study is being requested for suspicion of pulmonary embolism (PE); This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	4 months ago; There has not been any treatment or conservative therapy.; dysphagia, unintentional weight loss of 20 pounds in 4 months, h/o throat cancer, esophageal spasm/stricture, poor appetite, trouble swallowing, cough, abdominal distention, constipation, difficulty urinating; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is NOT a smoker nor do they have a history of smoking.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 15 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; This study is being requested for suspicion of pulmonary embolism (PE); This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Coughing up blood (hemoptysis) describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	jan 2021; There has been treatment or conservative therapy.; nausea, vomiting, fever, dehydration; The patient states that he finished his chemotherapy on march 29th and was then in the hospital for the next 30 days or so with infections in his GJ PEG tube. His PEG tube was changed for a J tube which also had issues with infections and leaking. These t; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Post-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Pt had a CT in April of 2021. Radiologist recommended a f/u in 12 months for her pulmonary nodule.; "There is NO evidence of a lung, mediastinal or chest mass noted within the last 30 days."; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Restaging images after 2 cycles of gemcitabine and docetaxel. Per 4/27 CT scans, patient with definite progression of disease in cystic mass in the left abdomen and increase in size of right pelvic mass.; There has been treatment or conservative therapy.; Restaging images after 2 cycles of gemcitabine and docetaxel. Per 4/27 CT scans, patient with definite progression of disease in cystic mass in the left abdomen and increase in size of right pelvic mass; Restaging images after 2 cycles of gemcitabine and docetaxel. Per 4/27 CT scans, patient with definite progression of disease in cystic mass in the left abdomen and increase in size of right pelvic mass.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Staging renal cell cancer; There has been treatment or conservative therapy.; Staging renal cell cancer; cheom; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	The patient is presenting new signs or symptoms.; "There is radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	There is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71250	Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 23 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72125 Computed tomography, cervical spine; without contrast material	Pt with 3 years of severe chronic involuntary contraction after stressing his muscles. On exam, I briefly tested his strength resulting in 5+ minutes of involuntary UE symmetric contractions, and LLE contractions/convulsion. Conscious and conversational d; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to neurological deficits.; "The caller indicated that the patient is not experiencing or presenting symptoms of Abnormal Gait, Lower Extremity Weakness, Asymmetric Reflexes, Cauda Equina Syndrome, Bowel or Bladder Disfunction, New Foot Drop, or Radiculopathy."; The patient is not experiencing sensory abnormalities such as numbness or tingling.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Lower extremity weakness.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72128 Computed tomography, thoracic spine; without contrast material	The patient does not have any neurological deficits.; This is a request for a thoracic spine CT.; There has been a supervised trial of conservative management for at least 6 weeks.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72131 Computed tomography, lumbar spine; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 04/23/22; There has been treatment or conservative therapy.; Dizziness, numbness, paralysis of left arm; medication, rest; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has had back pain for over 4 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	INCREASED LEFT LOWER EXTRMITY WEAKNESS OVER THE PAST WEEKK HE DID HAVE A FALL DUE TO HIS WORSENING WEAKNESS OF THE LEFT LOWER EXTREMITY. HIS NECK PAIN HAS ALSO BEEN WORSE OVER THE PAST SEVERAL DAYS PAIN RADIATED DOWN THE LEFT ARM AND THERE IS OCCASIONAL ; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Known or suspected infection or abscess	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; Arnold-Chiari Malformation describes the reason for requesting this procedure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; The patient has not completed 6 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; other medications as listed.; gabapentin to 900mg; It is not known if the patient has completed 6 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	INCREASED LEFT LOWER EXTRMITY WEAKNESS OVER THE PAST WEEK HE DID HAVE A FALL DUE TO HIS WORSENING WEAKNESS OF THE LEFT LOWER EXTREMITY. HIS NECK PAIN HAS ALSO BEEN WORSE OVER THE PAST SEVERAL DAYS PAIN RADIATED DOWN THE LEFT ARM AND THERE IS OCCASIONAL ; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Unilateral focal muscle wasting	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has None of the above; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Ice and/or heat has been used for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has New symptoms of bowel or bladder dysfunction; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered because of a suspicious mass/ tumor.; "The patient has had a pelvic ultrasound, barium, CT, or MR study."; This is a request for a Pelvis CT.; There are documented physical findings (painless hematuria, etc.) consistent with an abdominal mass or tumor.; Yes this is a request for a Diagnostic CT	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	continued arm pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 08/21; There has been treatment or conservative therapy.; worsening right elbow pain, continuing post surgery.; 09/21 - s/p open radial head/neck fracture repair; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is a history of upper extremity trauma or injury.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is suspicion of upper extremity neoplasm or tumor or metastasis.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Home stretching exercises, physician guided therapy exercises for shoulder mobility with no improvement; The patient received oral analgesics.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip."; There is a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73700 Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is suspicion of a lower extremity neoplasm, tumor or metastasis.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the lower extremity.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown.; It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Baker's cyst (swelling in the back of the knee) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Blood or abnormal fluid in the knee joint was noted as an indication for knee imaging	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study being ordered for initial staging of a known tumor other than prostate.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient has new lab results or other imaging studies including doppler or x-ray (plain film) findings.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of an Abscess of the upper abdominal area.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdomen. ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	4 months ago; There has not been any treatment or conservative therapy.; dysphagia, unintentional weight loss of 20 pounds in 4 months, h/o throat cancer, esophageal spasm/stricture, poor appetite, trouble swallowing, cough, abdominal distention, constipation, difficulty urinating; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	jan 2021; There has been treatment or conservative therapy.; nausea, vomiting, fever, dehydration; The patient states that he finished his chemotherapy on march 29th and was then in the hospital for the next 30 days or so with infections in his GJ PEG tube. His PEG tube was changed for a J tube which also had issues with infections and leaking. These t; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Restaging images after 2 cycles of gemcitabine and docetaxel. Per 4/27 CT scans, patient with definite progression of disease in cystic mass in the left abdomen and increase in size of right pelvic mass.; There has been treatment or conservative therapy.; Restaging images after 2 cycles of gemcitabine and docetaxel. Per 4/27 CT scans, patient with definite progression of disease in cystic mass in the left abdomen and increase in size of right pelvic mass; Restaging images after 2 cycles of gemcitabine and docetaxel. Per 4/27 CT scans, patient with definite progression of disease in cystic mass in the left abdomen and increase in size of right pelvic mass.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Staging renal cell cancer; There has been treatment or conservative therapy.; Staging renal cell cancer; cheom; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for acute pain.; It is unknown if there has been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	8 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown.; It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for known or suspected infection.; There are physical findings or abnormal blood work consistent with pancreatitis.; An abnormal amylase or lipase was NOT noted.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a renal cyst.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if there is suspicion of metastasis.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	74185 Magnetic resonance angiography, abdomen, with or without contrast material(s)	This is a request for a MR Angiogram of the abdomen.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Calcified plaque causing elevated velocities in the right carotid system. Further evaluation with CTA or MRA is recommended.; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Newly Diagnosed breast Cancer.; This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are NOT benign lesions in the breast associated with an increased cancer risk.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; hypertension, murmur, diabetic; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known left bundle branch block as documented on an EKG and has been interpreted by a Cardiologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed More than 1 year ago; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with an Other Tracer	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is New (recently diagnosed); The nodule is NOT calcified (full or partial); This PET Scan is being requested for a Pulmonary Nodule; The nodule is Less than 8 mm; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	ADMEMA; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/17/2022; There has been treatment or conservative therapy.; Weezing, Bilateral Rhonchi; Pulmonary clinic, PFT, CT of chest.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of possible or known pulmonary hypertension.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; The murmur is grade III (3) or greater.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; The patient has suspected prolapsed mitral valve.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The atrial fibrillation and/or atrial flutter is pre-existing.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The last Transthoracic Echocardiogram was 6 months or less ago.; New onset murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The onset or change in symptoms was more than 6 months ago.; It is unknown if Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; There is known valvular heart disease.; The patient's valvular heart disease is mild.; Pre-existing murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; There is known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is known valvular heart disease.; A Transthoracic Echocardiogram has not been completed.; The patient's valvular heart disease is moderate to severe.; Pre-existing murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is no known valvular heart disease.; New onset murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93350 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;		chest pain and tightness, tingling down left arm; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; few years; There has been treatment or conservative therapy.; also, complains of blurred vision; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93350 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;		This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93350 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;		This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93350 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;		This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; The member does not have known or suspected coronary artery disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93350 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;		This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Approval	93350 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;		This is a request for a Stress Echocardiogram.; To evaluate the heart prior to non-cardiac surgery.; The member does not have known or suspected coronary artery disease ; This study is being ordered for a neurological disorder.; Approx. 3 years ago; There has not been any treatment or conservative therapy.; chronic involuntary contraction after stressing muscles; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary					Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	chest pain and tightness, tingling down left arm; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; few years; There has been treatment or conservative therapy.; also, complains of blurred vision; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	3	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The headache's character is unknown.; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is immune-compromised.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	;This study is being ordered for a neurological disorder.; Approx. 3 years ago; There has not been any treatment or conservative therapy.; chronic involuntary contraction after stressing muscles; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for recent trauma or other injury.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Calcified plaque causing elevated velocities in the right carotid system. Further evaluation with CTA or MRA is recommended.; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	LAB WORK DREW ON PATIENT AND PROLACTIN LEVELS ELEVATED. FURTHER STUDY IS REQUESTED; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12 WEEKS PLUS; There has been treatment or conservative therapy.; HEADACHE;DIZZY;VOMITING; PATIENT HAS BEEN COMPLAINING OF MIGRAINES, HAS TAKEN TOPAMAX, AND TORADOL INJECTIONS WITH NO SUCCESS.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; It is unknown if this study is being ordered as a 12 month annual follow up.; This is a routine follow up.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	06/07/22; There has been treatment or conservative therapy.; nausea, vomiting, diarrhea, chills, abd pain, fever, abd tenderness (generalized); inpatient hospital stay, Cifdinir, Carisoprodol, Zofran, Rofecphin, Toradol, labs.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	06/2021, unexplained weight loss and other symptoms including fatigue and myalgias, DOES NOT HAVE current diagnosis of Cancer/tumor/ metastatic disease, this test is being ordered to rule that out.; It is not known if there has been any treatment or conservative therapy.; Unexplained weight loss, fatigue and myalgias starting around 06/2021.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has NOT been completed; Ths Interstitial Lung Disease is suspected	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Hemoptysis; A Chest/Thorax CT is being ordered.; This study is being ordered for screening of lung cancer.; The patient is 49 years old or younger.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	see previous note; This study is being ordered for trauma or injury.; 05/15/2022; There has been treatment or conservative therapy.; loss conscience fatigue neck pain headache; insadis rest ice; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; ; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/01/2021; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given Medication, adjusted activity level, rested for chest pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	PERSISTENT, INCREASED PAIN; MVA ON 5/3/2022; There has been treatment or conservative therapy.; PAIN IN THE HEAD, NECK, BACK; MEDICATION; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; 04/27/2022; There has not been any treatment or conservative therapy.; back pain, possible infection; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	PERSISTENT, INCREASED PAIN; MVA ON 5/3/2022; There has been treatment or conservative therapy.; PAIN IN THE HEAD, NECK, BACK; MEDICATION; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	5 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; 04/27/2022; There has not been any treatment or conservative therapy.; back pain, possible infection; This study is being ordered for Other	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Worsening pain over past 2 weeks despite conservative treatment.; This study is being ordered for trauma or injury.; 5/26/2022; There has been treatment or conservative therapy.; sciatic leg pain, avascular necrosis left hip; gabapentin, meloxicam, tramadol, chiropractor, Todadol injection, medrol dose pack.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is not a history of upper extremity trauma or injury.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has not directed conservative treatment for the past 4 weeks.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the lower extremity.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	"There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has a documented limitation of their range of motion.; This is a request for bilateral foot MRI.; ULCERS ON BOTH FEET.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Neoprene knee sleeve; The ordering MDs specialty is NOT Orthopedics.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	3 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Worsening pain over past 2 weeks despite conservative treatment.; This study is being ordered for trauma or injury.; 5/26/2022; There has been treatment or conservative therapy.; sciatic leg pain, avascular necrosis left hip; gabapentin, meloxicam, tramadol, chiropractor, Todadol injection, medrol dose pack.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a kidney/ureteral stone.; This patient is experiencing hematuria.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Diverticulitis.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This is a request for CT Angiography of the Abdomen and Pelvis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	06/07/22; There has been treatment or conservative therapy.; nausea, vomiting, diarrhea, chills, abd pain, fever, abd tenderness (generalized); inpatient hospital stay, Cifdinir, Carisoprodol, Zofran, Rocephin, Toradol, labs.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	06/2021, unexplained weight loss and other symptoms including fatigue and myalgias, DOES NOT HAVE current diagnosis of Cancer/tumor/ metastatic disease, this test is being ordered to rule that out.; It is not known if there has been any treatment or conservative therapy.; Unexplained weight loss, fatigue and myalgias starting around 06/2021.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); chronic diarrhea, abdominal distention; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Chronic pancreatitis; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; It is not known if this is the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	Radiology Services Denied Not Medically Necessary	This is a request for a heart or cardiac MRI	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	75571 Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	Radiology Services Denied Not Medically Necessary	Pt has hypertension and stage 3 chronic kidney disease. Pt also had high triglycerides.; This is a request for a CT scan for evaluation of coronary calcification.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors.; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; It is unknown if the symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; It is unknown if the symptoms are new or changing with new EKG changes or if the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The ordering MDs specialty is not Cardiology or Cardiac Surgery; Ambulates using assistive device such as crutches, cane, walker, or wheelchair	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; The chest pain was NOT relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other than listed above best describes the patients clinical presentation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; It is not known if the member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected cardiac septal defect.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; 4/25/22 first documented - unknown prior to; There has not been any treatment or conservative therapy.; tight chest;prior to going to sleep...but also with exertion;dyspnea;feels as though someone is sitting on his chest; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is NOT a Medicare member.; A biopsy substantiated the cancer type; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; hypertension, murmur, diabetic; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered as a post operative evaluation.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; This study is being ordered for symptoms of a heart problem	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient does not have a history of a recent heart attack or hypertensive heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has high blood pressure	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Shortness of breath is not related to any of the listed indications.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; Other cardiac stress testing was completed More than 6 months ago; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease.; 4/25/22 first documented - unknown prior to; There has not been any treatment or conservative therapy.; tight chest;prior to going to sleep....but also with exertion;dyspnea;feels as though someone is sitting on his chest; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	ADMEMA; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/17/2022; There has been treatment or conservative therapy.; Weezing, Bilateral Rhonchi; Pulmonary clinic, PFT, CT of chest.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/01/2021; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given Medication, adjusted activity level, rested for chest pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Internal Medicine	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; The member does not have known or suspected coronary artery disease	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the brain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)		There is an immediate family history of aneurysm.; This is a request for a Brain MRA. 02/15/2019; There has been treatment or conservative therapy.; Rectal cancer, staging ;Rectal cancer and left RCC with pulmonary nodules.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	71250 Computed tomography, thorax; without contrast material		Rectal cancer, staging, locoregional ;h/o rectal cancer s/p APR. Now with new onset right hydroureteronephrosis and quest LN/soft tissue at level of ureteral obstruct/stenosis; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	74150 Computed tomography, abdomen; without contrast material		This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; Yes, this is a request for follow up to a known tumor or abdominal cancer.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	74150 Computed tomography, abdomen; without contrast material		This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; It is unknown if the patient has new symptoms including hematuria, new lab results or other imaging studies including ultrasound, doppler or x-ray (plain film) findings, suspicion of an adrenal mass or suspicion of a renal mass.; Yes this is a request for a Diagnostic CT 02/15/2019; There has been treatment or conservative therapy.; Rectal cancer, staging ;Rectal cancer and left RCC with pulmonary nodules.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the abdominal arteries.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There is no radiologic evidence of mediastinal widening.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for vascular disease other than cardiac.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Interventional Radiologists	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	uterine fibroids found on US / painful menses; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Medical Genetics	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)		will fax clinicals; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Medical Genetics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a congenital abnormality.; 'None of the above' describes the congenital anomaly	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	74150 Computed tomography, abdomen; without contrast material		This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); abnormal renal ultrasound; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)		This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for evaluation of the heart prior to non cardiac surgery.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; The ordering provider's specialty is Nephrology ; The patient is being treated for high blood pressure (hypertension)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; The ordering provider's specialty is Nephrology ; The patient is NOT being treated for high blood pressure (hypertension)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; see attached clinicals; It is not known if there has been any treatment or conservative therapy.; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/19/2022; There has not been any treatment or conservative therapy.; Fatigue; Low Back pain; Pain in bi-lateral legs; acquired renal cysts; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; see attached clinicals; It is not known if there has been any treatment or conservative therapy.; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Nephrology	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/19/2022; There has not been any treatment or conservative therapy.; Fatigue; Low Back pain; Pain in bi-lateral legs; acquired renal cysts; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material		Looking for cause of CSF leak. Need additional imaging for proper assessment/treatment; This study is being ordered for trauma or injury.; 03/24/2022; There has been treatment or conservative therapy.; Since discharge pt reports few episodes of clear nasal drainage. Last episode occurred as she bent over and had sharp pain in her head; Admitted to hospital for monitoring, abx administration and physical therapy, discharged home with instructions for follow up care; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Evaluation of known or suspected brain bleeding (hemorrhage, hematoma, subdural) best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Evaluation of known or suspected subarachnoid hemorrhage best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Post-operative evaluation best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	3	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are NO recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness; This is a follow up request for a known hemorrhage/hematoma or vascular abnormality	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a history of cancer.; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a known brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected blood vessel abnormality (AVM, aneurysm) with documented new or changing signs and or symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; It is not known if the neck mass has been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; 09/2019; There has been treatment or conservative therapy.; persistent atherosclerotic change with severely compromised flow in the visualized distal vertebral arteries / severe fatigue; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; 2021; There has been treatment or conservative therapy.; continued neck pain, headaches, unstable; medication, physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Acute right arterial ischemic stroke, MCA (middle cerebral artery); This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Acute right arterial ischemic stroke, MCA (middle cerebral artery); There has been treatment or conservative therapy.; Acute right arterial ischemic stroke, MCA (middle cerebral artery); Acute right arterial ischemic stroke, MCA (middle cerebral artery); The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	assess for surgery; This study is being ordered for Vascular Disease.; 11/2021; There has been treatment or conservative therapy.; slurred speech, facial droop, drooling; Dapt statin, aggressive risk modification, aspirin daily; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Assessing if clipping or endo vascular embolization is needed.; This study is being ordered for Vascular Disease.; 02/06/2022; There has been treatment or conservative therapy.; SOB.; Medication and surgical consideration and risk factor modification.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	FOLLOW UP TO SURGERY; This study is being ordered for Vascular Disease.; 4/8/22; There has been treatment or conservative therapy.; LOSS OF CONSCIOUSNESS; SURGERY, clip ligation of R MCA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	need to check condition of the thrombus; This study is being ordered for Vascular Disease.; 12/15/2021; There has been treatment or conservative therapy.; ; physical therapy, Eliquis, aspirin, aggressive stroke management, risk factor modification, stoke work up; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Occlusion and stenosis of left carotid artery; This study is being ordered for Vascular Disease.; Occlusion and stenosis of left carotid artery; There has been treatment or conservative therapy.; Occlusion and stenosis of left carotid artery; Occlusion and stenosis of left carotid artery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	PATIENT IS ON DECLINE SINCE LAST IMAGING; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Cerebellar stroke; There has been treatment or conservative therapy.; VERTIGO DIFFICULTY SWALLOWING UNCONSCIOUSNESS; ANTIPLATELET THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	posterior cerebral artery stroke; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; posterior cerebral artery stroke; There has been treatment or conservative therapy.; posterior cerebral artery stroke; posterior cerebral artery stroke; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	vertebral artery stenosis ;Carotid or vertebral occlusion; This study is being ordered for Vascular Disease.; 02/28/2022; There has been treatment or conservative therapy.; vertebral artery stenosis ;Carotid or vertebral occlusion; stenting of the right carotid artery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the brain.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; 09/2019; There has been treatment or conservative therapy.; persistent atherosclerotic change with severely compromised flow in the visualized distal vertebral arteries / severe fatigue; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; 2021; There has been treatment or conservative therapy.; continued neck pain, headaches, unstable; medication, physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Acute right arterial ischemic stroke, MCA (middle cerebral artery); This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Acute right arterial ischemic stroke, MCA (middle cerebral artery); There has been treatment or conservative therapy.; Acute right arterial ischemic stroke, MCA (middle cerebral artery); Acute right arterial ischemic stroke, MCA (middle cerebral artery); The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	assess for surgery; This study is being ordered for Vascular Disease.; 11/2021; There has been treatment or conservative therapy.; slurred speech, facial droop, drooling; Dapt statin, aggressive risk modification, aspirin daily; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Assessing if clipping or endo vascular embolization is needed.; This study is being ordered for Vascular Disease.; 02/06/2022; There has been treatment or conservative therapy.; SOB.; Medication and surgical consideration and risk factor modification.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	FOLLOW UP TO SURGERY; This study is being ordered for Vascular Disease.; 4/8/22; There has been treatment or conservative therapy.; LOSS OF CONSCIOUSNESS; SURGERY, clip ligation of R MCA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	need to check condition of the thrombus; This study is being ordered for Vascular Disease.; 12/15/2021; There has been treatment or conservative therapy.; ; physical therapy, Eliquis, aspirin, aggressive stroke management, risk factor modification, stroke work up; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Occlusion and stenosis of left carotid artery; This study is being ordered for Vascular Disease.; Occlusion and stenosis of left carotid artery; There has been treatment or conservative therapy.; Occlusion and stenosis of left carotid artery; Occlusion and stenosis of left carotid artery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	PATIENT IS ON DECLINE SINCE LAST IMAGING; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Cerebellar stroke; There has been treatment or conservative therapy.; VERTIGO DIFFICULTY SWALLOWING UNCONSCIOUSNESS; ANTIPLATELET THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	posterior cerebral artery stroke; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; posterior cerebral artery stroke; There has been treatment or conservative therapy.; posterior cerebral artery stroke; posterior cerebral artery stroke; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	vertebral artery stenosis ;Carotid or vertebral occlusion; This study is being ordered for Vascular Disease.; 02/28/2022; There has been treatment or conservative therapy.; vertebral artery stenosis ;Carotid or vertebral occlusion; stenting of the right carotid artery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the Neck.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for suspicion of neoplasm, tumor or metastasis	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	46 y/o woman c/o episodes of pressure in the top of her head, double/blurred vision, numbness/tingling to the left side of the face and left hand, headaches, BUE/BLE weakness that started in March 2022; also c/o unsteady gait and falls; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	it has been 2 years since the cerebral arteriovenous malformation has been evaluated. She had a previous total occlusion of the AVM. Need rupture evaluation.; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is an immediate family history of aneurysm.; This is a request for a Brain MRA.	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is not an immediate family history of aneurysm.; The patient has a known aneurysm.; This is a request for a Brain MRA.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	2015; There has not been any treatment or conservative therapy.; auditory fluctuations; This study is being ordered for Congenital Anomaly	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient fell on 04/27/22; There has been treatment or conservative therapy.; neck pain, middle mental acuity diminution, BP elevated; Patient had surgery on her neck and has been taking pain medication.; This study is being ordered for Neurological Disorder	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	The ordering MDs specialty is Neurological Surgery ; This request is NOT for pre-operative planning; This study is being ordered for Pre Operative or Post Operative Evaluation; There is a post-operative complication.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is a suspected Acoustic Neuroma or tumor of the inner or middle ear.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Chronic headache, longer than one month describes the headache's character.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected blood vessel abnormality (AVM, aneurysm) with documented new or changing signs and or symptoms best describes the reason that I have requested this test.; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Known brain tumor best describes the patient's tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Known tumor outside the brain best describes the patient's tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for an aneurysm.; This study is being ordered for neurological deficits.; The patient has NOT had a Brain MRI in the last 6 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for an aneurysm.; This study is being ordered for neurological deficits.; The patient has NOT had a Brain MRI in the last 12 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack); The patient has NOT had a Brain MRI in the last 6 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack); The patient has NOT had a Brain MRI in the last 12 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a congenital abnormality.; The patient has Fluid on the brain (hydrocephalus).	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a congenital abnormality.; The patient has Small head (Microcephaly).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed more than 10 months ago.	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed more than 12 months ago	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the last 12 months	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the past 10 months.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Unknown; There has been treatment or conservative therapy.; Headaches/ syrnix; Chiropractic care and Mobic; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Parsonage-Turner Syndrome; This study is NOT being ordered for a Work-up for Suspicious Mass, Known Tumor, Known or Suspected Inflammatory Disease, etc...; This is a request for a chest MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	MRI Cervical 08/24/21 - Increased signal at C4-5 in the cervical cord suggesting myelomalacia or edema, extensive postsurgical changes including laminectomies from C3 to C6, anterior fusion from C3 to C7, posterior fusion from C3 to C7, metallic artifact ; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	Patient is a 92 - year old who was in a car accident on 2/14/2022. She is wearing a soft collar since she went to the ER; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	Patient is requesting to take off his collar at night to sleep and has been very compliant. Doctor needs to confirm with CT C-spine that he is healed before taking off.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	Please refer to uploaded clinicals; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to pre-operative evaluation.; There is no known condition of tumor, infection, or neurological deficits.; There is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	risk of paralysis if patient fell; This study is being ordered for a neurological disorder.; Couple years. Mri from 2 years ago; There has been treatment or conservative therapy.; neck pain, arm pain, weakness in upper and lower extremities, balance off, grip strength weak, surgical spine cord adenma in association with large calcified disk herniation; has epidermal injection and doctor does not think therapy should be done; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	She has pain in both flexion and extension. Her general neurologic examination is unchanged from her previous exam. I do not think there is any doubt that she has a pseudoarthrosis at both L4-L5 and L5-S1. Her SI joint examination is completely negative i; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 11/8/21; There has been treatment or conservative therapy.; Her greatest pain complaint is low back pain that radiates to the bilateral hips, bilateral buttocks, and goes down the posterior aspect of the bilateral lower extremities right greater than left. She states she has decreased strength in both legs, numbne; PHYSICAL THERAPY; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	SYRNIX OF SPINAL CORD COMPRESSION; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to pre-operative evaluation.; There is no known condition of tumor, infection, or neurological deficits.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI; The patient is experiencing or presenting symptoms of Abnormal gait.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI; The patient is experiencing or presenting symptoms of Lower extremity weakness.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to follow-up surgery or fracture within the last 6 months.; The patient has been seen by, or the ordering physician is, a neuro-specialist, orthopedist, or oncologist.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to neurological deficits.; There has been a supervised trial of conservative management for at least 6 weeks.; "The caller indicated that the patient is not experiencing or presenting symptoms of Abnormal Gait, Lower Extremity Weakness, Asymmetric Reflexes, Cauda Equina Syndrome, Bowel or Bladder Disfunction, New Foot Drop, or Radiculopathy.;" The patient is experiencing sensory abnormalities such as numbness or tingling.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to pre-operative evaluation.; The patient is experiencing or presenting symptoms of lower extremity weakness.; There is a known condition of neurological deficits.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is to be part of a Myelogram.; This is a request for a Cervical Spine CT	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	We are going to get a cervical and thoracic myelogram and then have her return to see me.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 09/13/21; There has been treatment or conservative therapy.; ; She is eight months out from her cervical fusion. She states the pain she is having now is a different type of pain than she had prior to surgery. She rates it about 80% toward the worst pain imaginable. She is having neck pain that goes mid-scapula and s; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72128 Computed tomography, thoracic spine; without contrast material	; This is a request for a thoracic spine CT.; There is no reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72128 Computed tomography, thoracic spine; without contrast material	Patient would benefit from removal of this pump for further evaluation of his back pain and leg weakness.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Patient presents to clinic for evaluation for possible removal of his pain pump.; There has been treatment or conservative therapy.; Left lower extremity pain and weakness; Pain pump was placed in 1995 and replaced multiple times. Pump had malfunctioned causing overdoses and hospital admissions due to this.; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72128 Computed tomography, thoracic spine; without contrast material	This is a request for a thoracic spine CT.; The study is being ordered due to known or suspected infection or abscess.; There is a reason why the patient cannot undergo a thoracic spine MRI.; There is laboratory or x-ray evidence of osteomyelitis.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72128 Computed tomography, thoracic spine; without contrast material	This study is being ordered for staging.; This is a request for a thoracic spine CT.; The study is being ordered due to pre-operative evaluation.; There is a reason why the patient cannot undergo a thoracic spine MRI.; There is a known condition of tumor.; Yes this is a request for a Diagnostic CT tingling; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/30/2021; There has been treatment or conservative therapy.; gait disturbance, numbness, tingling; Physical Therapy, Injection therapy, chiropractic care; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72128 Computed tomography, thoracic spine; without contrast material	We are going to get a cervical and thoracic myelogram and then have her return to see me.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 09/13/21; There has been treatment or conservative therapy.; ; She is eight months out from her cervical fusion. She states the pain she is having now is a different type of pain than she had prior to surgery. She rates it about 80% toward the worst pain imaginable. She is having neck pain that goes mid-scapula and s; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72128 Computed tomography, thoracic spine; without contrast material	hx of posterior neck pain radiation to B/L shoulders, experiencing significant mid to lower lumbar pain, 3 week hx of intermittent difficulty moving legs; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 09/21; There has been treatment or conservative therapy.; cervical radiculopathy, post operative pain, gait disturbance, intervertebral disc disorder, low back pain, new symptoms - 10/10 sharp, constant pain for 3 weeks, bilateral leg weakness/numbness/tingling - nothing relieves symptoms; Surgery 06/21, Surgery 10/21; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	Patient has a fluid collection at the L3-L4 level of her back that needs to be evaluated.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/21/2021; There has been treatment or conservative therapy.; Small fluid collection in the subcutis fat of the back at the;L3-4 level associated with her neurostimulator leads. Left-sided low back and buttock pain; Spinal cord stimulator placement in 2020; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	Patient would benefit from removal of this pump for further evaluation of his back pain and leg weakness.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Patient presents to clinic for evaluation for possible removal of his pain pump.; There has been treatment or conservative therapy.; Left lower extremity pain and weakness; Pain pump was placed in 1995 and replaced multiple times. Pump had malfunctioned causing overdoses and hospital admissions due to this.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	She has pain in both flexion and extension. Her general neurologic examination is unchanged from her previous exam. I do not think there is any doubt that she has a pseudoarthrosis at both L4-L5 and L5-S1. Her SI joint examination is completely negative i; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 11/8/21; There has been treatment or conservative therapy.; Her greatest pain complaint is low back pain that radiates to the bilateral hips, bilateral buttocks, and goes down the posterior aspect of the bilateral lower extremities right greater than left. She states she has decreased strength in both legs, numbne; PHYSICAL THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with oral analgesics.; It is not known if the patient has completed 6 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 6 weeks.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	8	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Known or Suspected Infection or abscess; There is laboratory or x-ray evidence of osteomyelitis.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Paresthesias in the right lower extremity in the calf.; No pathological reflexes; Negative hoffmans; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; It is not known when surgery is scheduled.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.; Yes this is a request for a Diagnostic CT	6	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is scheduled within the next 4 weeks.; No, the last Lumbar spine MRI was not performed within the past two weeks.; Yes this is a request for a Diagnostic CT	5	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Surgery is scheduled within the next 4 weeks.; Yes, the last Lumbar spine MRI was performed within the past two weeks.; Yes this is a request for a Diagnostic CT	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Weakness in right lower extremity per patient.; Surgery is scheduled within the next 4 weeks.; Yes, the last Lumbar spine MRI was performed within the past two weeks.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Suspected Tumor with or without Metastasis; There is no evidence of tumor or metastasis on a bone scan or x-ray.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72131 Computed tomography, lumbar spine; without contrast material	tingling; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/30/2021; There has been treatment or conservative therapy.; gait disturbance, numbness, tingling; Physical Therapy, Injection therapy, chiropractic care; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; There has been treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; Surgery is NOT planned or scheduled in the next 6 weeks	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	2015; There has not been any treatment or conservative therapy.; auditory fluctuations; This study is being ordered for Congenital Anomaly	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	he is in therapy and not getting better, I want to get a lumbar and cervical MRI and have him return to see me. I told him I really do not want to start any different treatment or medication until we see what is going on with his neck and make sure his lu; 12/30/21; There has been treatment or conservative therapy.; His greatest pain complaint is neck pain that radiates mid-scapula. He is having right lower extremity numbness. He rates his pain about 70% toward the worst pain imaginable.;He is also having some deep right-sided buttock pain. He is over a year out f; PHYSICAL THERAPY; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	hx of posterior neck pain radiation to B/L shoulders, experiencing significant mid to lower lumbar pain, 3 week hx of intermittent difficulty moving legs; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 09/21; There has been treatment or conservative therapy.; cervical radiculopathy, post operative pain, gait disturbance, intervertebral disc disorder, low back pain, new symptoms - 10/10 sharp, constant pain for 3 weeks, bilateral leg weakness/numbness/tingling - nothing relieves symptoms; Surgery 06/21, Surgery 10/21; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	In order to evaluate her cervical complaints, we must obtain an MRI of the cervical spine to rule out any structural abnormalities including cervical stenosis, as well as for procedural planning purposes. We will also obtain x-rays of the cervical spine. ; A FEW YEARS AGO - PROGRESSIVELY WORSE IN LAST FEW MONTHS; There has been treatment or conservative therapy.; ; She has completed 2 weeks of physical therapy for a total of 4 sessions that have significantly increased her neck and low back pain.;She reports taking over-the-counter Tylenol for pain. She is no longer taking Ibuprofen PRN for pain as this elevated ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	low back pain and left leg pain in an L5 distribution. He also has neck pain with bilateral arm pain. He is hyperreflexic on today's exam. He has weakness of his left foot as well as numbness and tingling in both feet.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; Surgery is NOT planned or scheduled in the next 6 weeks	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Lumbar MRI reviewed, bulging disc at L3 through S1, not explaining patients symptoms or physical exam findings of myelopathy. Recommend further imaging to evaluate for cord compression.; Patient referred by a primary care provider evaluated since October 2021; There has been treatment or conservative therapy.; Patient presents with low back pain along with right lower extremity pain, tingling, paresthesia, bladder / bowel dysfunction, and weakness.; Patients treatment includes nonsteroidal anti-inflammatory drugs and physical therapy; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Pt evaluated by neurology specialist, Dr. Graham, and was referred due to abnormal signal in the spinal cord. Need evaluation due to symptoms and abnormal imaging.; Patient with progressive numbness, ataxia, weakness, frequent falls with history of MRSA spine infection, corpectomy, and fusion 17 yrs ago.; It is not known if there has been any treatment or conservative therapy.; Patient presents neck pain, upper extremity weakness, upper extremity numbness and tingling, ataxia, and lower extremity weakness.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	resents with burning in his neck and low back pain. This pain has progressively gotten worst following a March 15, 2022, motor vehicle accident. He states the other car was travelling 100 mph when it hit him. He states his truck flipped multiple times. He; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	risk of paralysis if patient fell; This study is being ordered for a neurological disorder.; Couple years. Mri from 2 years ago; There has been treatment or conservative therapy.; neck pain, arm pain, weakness in upper and lower extremities, balance off, grip strength weak, surgical spine cord adenma in association with large calcified disk herniation; has epideral injection and doctor does not think therapy should be done; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Summary;;This 46 year old female presents with low back and left leg pain. She is s/p a Sacroiliac Joint Injection on the left completed on 6/15/22. She reports 65% relief of her pain for a few hours and 50% relief of her low back and left leg to date. S; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs speciality is Neurological Surgery ; This request is for pre-operative planning; Surgery is NOT planned or scheduled in the next 6 weeks	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	tandem gait abnormal; This study is being ordered for Congenital Anomaly.; 13 years ago; It is not known if there has been any treatment or conservative therapy.; worsening suboccipital headaches radiating to bilateral head ( pressure like at times). some tinnitus as well as vision changes. She had SOD by Dr. Krischt in 2010 for severe headaches similar to current recurrent headaches. Also has had several episodes ; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	The ordering MDs speciality is Neurological Surgery ; This request is NOT for pre-operative planning; This study is being ordered for Pre Operative or Post Operative Evaluation; There is a post-operative complication.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Known or suspected infection or abscess	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Dermatoma sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatoma sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	14	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; Follow-up to surgery or fracture within the last 6 months describes the reason for requesting this procedure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; Surgery is planned or scheduled in the next 6 weeks	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Neurological Surgery ; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Unknown; There has been treatment or conservative therapy.; Headaches/ syring; Chiropractic care and Mobic; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	;; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	hx of posterior neck pain radiation to B/L shoulders, experiencing significant mid to lower lumbar pain, 3 week hx of intermittent difficulty moving legs; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 09/21; There has been treatment or conservative therapy.; cervical radiculopathy, post operative pain, gait disturbance, intervertebral disc disorder, low back pain, new symptoms - 10/10 sharp, constant pain for 3 weeks, bilateral leg weakness/numbness/tingling - nothing relieves symptoms; Surgery 06/21, Surgery 10/21; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Patient is having worsening symptoms and abnormal imaging showing scoliotic deformity with severe ddd, stenosis, endplate deformity, mass effect. History of kyphoplasty, T12 fracture, and cervical canal stenosis.; Chronic low back pain for years worsening in February of 2022; There has been treatment or conservative therapy.; back pain, buttocks pain, lower extremity pain, back stiffness, weakness, numbness, parasthesia; Patient treatment has included physical therapy, injections, and surgical procedure.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Pt evaluated by neurology specialist, Dr. Graham, and was referred due to abnormal signal in the spinal cord. Need evaluation due to symptoms and abnormal imaging.; Patient with progressive numbness, ataxia, weakness, frequent falls with history of MRSA spine infection, corpectomy, and fusion 17 yrs ago.; It is not known if there has been any treatment or conservative therapy.; Patient presents neck pain, upper extremity weakness, upper extremity numbness and tingling, ataxia, and lower extremity weakness.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	tandem gait abnormal; This study is being ordered for Congenital Anomaly.; 13 years ago; It is not known if there has been any treatment or conservative therapy.; worsening suboccipital headaches radiating to bilateral head ( pressure like at times). some tinnitus as well as vision changes. She had SOD by Dr. Krischt in 2010 for severe headaches similar to current recurrent headaches. Also has had several episodes ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; It is not known if there is weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; please see clinicals	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is reflex abnormality.; hyperreflexia, myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Trauma or recent injury; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; Surgery is planned or scheduled in the next 6 weeks	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Neurological Surgery ; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Neurological Surgery ; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is presenting with new symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; Surgery is NOT planned or scheduled in the next 6 weeks	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	he is in therapy and not getting better, I want to get a lumbar and cervical MRI and have him return to see me. I told him I really do not want to start any different treatment or medication until we see what is going on with his neck and make sure his lu; 12/30/21; There has been treatment or conservative therapy.; His greatest pain complaint is neck pain that radiates mid-scapula. He is having right lower extremity numbness. He rates his pain about 70% toward the worst pain imaginable.;He is also having some deep right-sided buttock pain. He is over a year out f; PHYSICAL THERAPY; This study is being ordered for Other	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	In order to evaluate her cervical complaints, we must obtain an MRI of the cervical spine to rule out any structural abnormalities including cervical stenosis, as well as for procedural planning purposes. We will also obtain x-rays of the cervical spine. ; A FEW YEARS AGO - PROGRESSIVELY WORSE IN LAST FEW MONTHS; There has been treatment or conservative therapy.; ; She has completed 2 weeks of physical therapy for a total of 4 sessions that have significantly increased her neck and low back pain.;She reports taking over-the-counter Tylenol for pain. She is no longer taking Ibuprofen PRN for pain as this elevated ; This study is being ordered for Other	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	low back pain and left leg pain in an L5 distribution. He also has neck pain with bilateral arm pain. He is hyperreflexic on today's exam. He has weakness of his left foot as well as numbness and tingling in both feet; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; Surgery is NOT planned or scheduled in the next 6 weeks	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	resents with burning in his neck and low back pain. This pain has progressively gotten worst following a March 15, 2022, motor vehicle accident. He states the other car was travelling 100 mph when it hit him. He states his truck flipped multiple times. He; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Summary;;This 46 year old female presents with low back and left leg pain. She is s/p a Sacroiliac Joint Injection on the left completed on 6/15/22. She reports 65% relief of her pain for a few hours and 50% relief of her low back and left leg to date. S; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; Surgery is NOT planned or scheduled in the next 6 weeks	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	tandem gait abnormal; This study is being ordered for Congenital Anomaly; ; 13 years ago; It is not known if there has been any treatment or conservative therapy.; worsening suboccipital headaches radiating to bilateral head ( pressure like at times). some tinnitus as well as vision changes. She had SOD by Dr. Krischt in 2010 for severe headaches similar to current recurrent headaches. Also has had several episodes ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; It is unknown if the patient has acute or chronic back pain.; This study is being requested for Follow-up to surgery or fracture within the last 6 months	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; None of the above has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; Something other than listed has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Follow-up to surgery or fracture within the last 6 months	3	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected infection or abscess	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Pre-operative evaluation	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	26	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	27	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	30	Apr-2022	Jun-2022



4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via BBI.; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Chiropractic care has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Physical exam findings consistent with myelopathy; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Neurological Surgery ; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Neurological Surgery ; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is presenting with new symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)		ALL NOTES ATTACHED INCLUDING XRAYs; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; This 50-year-old female presents with improving low back and right leg pain. She is s/p a Sacroiliac Joint Injection bilaterally completed on 3/21/22. She reports 75% relief of her low back and right leg pain. She rates her pain now as a 4/10. She states; 6 SESSIONS OF PHYSICAL THERAPY;RX - GABAPENTIN;STEROID INJECTIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology lumbosacral nerves; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)		The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences		The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; This study is being ordered for something other than recent injury, planned surgery, mass, tumor or cancer, joint infection/inflammation, post operative evaluation, or aseptic necrosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)		This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Evaluation of known or suspected brain bleeding (hemorrhage, hematoma, subdural) best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	Looking for cause of CSF leak. Need additional imaging for proper assessment/treatment; This study is being ordered for trauma or injury.; 03/24/2022; There has been treatment or conservative therapy.; Since discharge pt reports few episodes of clear nasal drainage. Last episode occurred as she bent over and had sharp pain in her head; Admitted to hospital for monitoring, abx administration and physical therapy, discharged home with instructions for follow up care; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; fracture; There has been treatment or conservative therapy.; pain; collar; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the brain.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; fracture; There has been treatment or conservative therapy.; pain; collar; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	2001; There has been treatment or conservative therapy.; Residual headaches; Surgery; This study is being ordered for Congenital Anomaly	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	tandem gait abnormal; This study is being ordered for Congenital Anomaly.; 13 years ago; It is not known if there has been any treatment or conservative therapy.; worsening suboccipital headaches radiating to bilateral head ( pressure like at times). some tinnitus as well as vision changes. She had SOD by Dr. Krischt in 2010 for severe headaches similar to current recurrent headaches. Also has had several episodes ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a congenital abnormality.; 'None of the above' describes the congenital anomaly	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; It is not known if the patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the last 12 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; It is not known if the patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the past 10 months.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the last 12 months	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the past 10 months.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	PROVIDER HAS ORDERED AN MRI C SPINE W/O CONTRAST AS WELL AS THIS CT C SPINE W/O CONTRAST; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	This study is to be part of a Myelogram.; This is a request for a Cervical Spine CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has a fluid collection at the L3-L4 level of her back that needs to be evaluated.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/21/2021; There has been treatment or conservative therapy.; Small fluid collection in the subcutis fat of the back at the;L3-4 level associated with her neurostimulator leads. Left-sided low back and buttock pain; Spinal cord stimulator placement in 2020; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; WEAKNESS IN BOTH LEGS; It is not known if there is x-ray evidence of a lumbar recent fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is reflex abnormality.; Deep tendon reflexes are diminished throughout.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; I would also recommend her to have a CT of the lumbar spine to assess the laminectomy defect.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; It is not known when surgery is scheduled.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is scheduled within the next 4 weeks.; No, the last Lumbar spine MRI was not performed within the past two weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has not been any treatment or conservative therapy.; ; ; This study is being ordered for Congenital Anomaly	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is NOT for pre-operative planning; There is NOT a post operative complication	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	2001; There has been treatment or conservative therapy.; Residual headaches; Surgery; This study is being ordered for Congenital Anomaly	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. 04/12/2021; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given physical therapy; This study is being ordered for Neurological Disorder	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	patient completed cervical MRI at her local hospital; however their imaging system crashed and they were unable to recover the images on a disc for review. Need to repeat cervical MRI so surgeon can make an accurate assessment and treatment recommendation; More than a year; There has been treatment or conservative therapy.; Describes neck pain radiating to bilateral upper extremities for many years reaching her hands and 3rd and 4th fingers, worse on the right. She endorses tingling in the arms, hands, and fingers which is aggravated by holding her phone and leaning on the a; Physical therapy, Gabapentin, and Meloxicam; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Patient fell on 04/27/22; There has been treatment or conservative therapy.; neck pain, middle mental acuity diminution, BP elevated; Patient had surgery on her neck and has been taking pain medication.; This study is being ordered for Neurological Disorder	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has progressively gotten worse despite the conservative treatment. Xrays shows spondylosis.; unknown; There has been treatment or conservative therapy.; neck, back, hip, and leg pain. Numbness and tingling into the legs. Weakness, joint stiffness, joint swelling.; Physical therapy, anti-inflammatories, pain medication, bracing, heat, ice, massage.; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	PATIENT IS HAVING INCREASING PAIN AND WANTS TO COME IN AND TALK SURGERY. REQUESTING A NEW CERVICAL AND LUMBAR MRI'S FOR REVIEW TO TALK SURGERY OPTIONS.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is for pre-operative planning; It is unknown if Surgery is planned or scheduled in the next 6 weeks	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Patient is having worsening symptoms and abnormal imaging showing scoliotic deformity with severe ddd, stenosis, endplate deformity, mass effect. History of kyphoplasty, T12 fracture, and cervical canal stenosis.; Chronic low back pain for years worsening in February of 2022; There has been treatment or conservative therapy.; back pain, buttocks pain, lower extremity pain, back stiffness, weakness, numbness, paresthesia; Patient treatment has included physical therapy, injections, and surgical procedure.; This study is being ordered for Neurological Disorder	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	RULE OUT SPINAL CORD COMPRESSION; PRIOR TO 6/16/21; There has been treatment or conservative therapy.; NECK AND LOW BACK PAIN, NUMBNESS AND TINGLING IN LOWE EXTREMITIES, NUMBNESS IN HANDS, NECK SPASMS; PHYSICAL THERAPY, HOME EXERCISES, MEDICATED; This study is being ordered for Other	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had a diagnostic test (such as an EMG/nerve conduction) involving the cervical spine	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has not been any treatment or conservative therapy.; ; ; This study is being ordered for Congenital Anomaly	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Lumbar MRI reviewed, bulging disc at L3 through S1, not explaining patients symptoms or physical exam findings of myelopathy. Recommend further imaging to evaluate for cord compression.; Patient referred by a primary care provider evaluated since October 2021; There has been treatment or conservative therapy.; Patient presents with low back pain along with right lower extremity pain, tingling, paresthesia, bladder / bowel dysfunction, and weakness.; Patients treatment includes nonsteroidal anti-inflammatory drugs and physical therapy; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Previous history of infections in the spine.; Unknown; There has been treatment or conservative therapy.; Mid back pain that goes all the way down the lower part of her back. She is having issues with balance and numbness and tingling into both feet. She has had multiple falls in the last few weeks.; Antibiotics; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	r/o other areas of compression of neural elements; unknown; It is not known if there has been any treatment or conservative therapy.; patient reports dragging of left lower extremity; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; Back & Pelvis: tender to palpation mid lower lumbar;;Neurological;Gait (neuro): other (ambulates independently);Sensory exam: other (sensation intact to light touch);Motor exam: no fasciculations and other (strength intact, no atrophy);Reflexes: Int	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; he reports intermittent weakness, numbness, and tingling to her left arm.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; PAIN IS MADE WORSE WITH SQUATTING, CLIMBING STAIRS, REACHING, SITTING, STANDING AND WALKING	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	;; There has been treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	;; There has been treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	;; There has not been any treatment or conservative therapy.; ; This study is being ordered for Congenital Anomaly	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery ; This request is NOT for pre-operative planning; There is NOT a post operative complication	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. 04/12/2021; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given physical therapy; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	patient completed cervical MRI at her local hospital; however their imaging system crashed and they were unable to recover the images on a disc for review. Need to repeat cervical MRI so surgeon can make an accurate assessment and treatment recommendation; More than a year; There has been treatment or conservative therapy.; Describes neck pain radiating to bilateral upper extremities for many years reaching her hands and 3rd and 4th fingers, worse on the right. She endorses tingling in the arms, hands, and fingers which is aggravated by holding her phone and leaning on the a; Physical therapy, Gabapentin, and Meloxicam.; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has progressively gotten worse despite the conservative treatment. Xrays shows spondylosis.; unknown; There has been treatment or conservative therapy.; neck, back, hip, and leg pain. Numbness and tingling into the legs. Weakness, joint stiffness, joint swelling.; Physical therapy, anti-inflammatories, pain medication, bracing, heat, ice, massage.; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	PATIENT IS HAVING INCREASING PAIN AND WANTS TO COME IN AND TALK SURGERY. REQUESTING A NEW CERVICAL AND LUMBAR MRI'S FOR REVIEW TO TALK SURGERY OPTIONS.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Neurological Surgery; This request is for pre-operative planning; It is unknown if Surgery is planned or scheduled in the next 6 weeks	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Previous history of infections in the spine.; Unknown; There has been treatment or conservative therapy.; Mid back pain that goes all the way down the lower part of her back. She is having issues with balance and numbness and tingling into both feet. She has had multiple falls in the last few weeks.; Antibiotics; This study is being ordered for Inflammatory / Infectious Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	r/o other areas of compression of neural elements; unknown; It is not known if there has been any treatment or conservative therapy.; patient reports dragging of left lower extremity; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	RULE OUT SPINAL CORD COMPRESSION; PRIOR TO 6/16/21; There has been treatment or conservative therapy.; NECK AND LOW BACK PAIN, NUMBNESS AND TINGLING IN LOWE EXTREMITIES, NUMBNESS IN HANDS. NECK SPASMS; PHYSICAL THERAPY, HOME EXERCICES, MEDICATED; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for pelvic trauma or injury.; This is an evaluation of the sacrum.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	ALL NOTES ATTACHED INCLUDING XRAYs; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has been treatment or conservative therapy.; This 50-year-old female presents with improving low back and right leg pain. She is s/p a Sacroiliac Joint Injection bilaterally completed on 3/21/22. She reports 75% relief of her low back and right leg pain. She rates her pain now as a 4/10. She states; 6 SESSIONS OF PHYSICAL THERAPY;RX - GABAPENTIN;STEROID INJECTIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurological Surgery	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	0042T	Cerebral perfusion analysis using computed tomography with contrast administration, including post-processing of parametric maps with determination of cerebral blood flow, cerebral blood volume, and mean transit time		; This study is being ordered for Vascular Disease.; she suffered a stroke and was taken to an OSH in mid-2021. Prior to her stroke she was not aware that she had moyamoya; There has been treatment or conservative therapy.; She endorses R shoulder, arm, and hip pain. She has dependent edema attributed to the amlodipine. suffer from occasional bladder incontinence and inappropriate behavior as well as marked developmental regression. She no longer has focal weakness or crania; Eliquis after the stroke but this was changed to Aspirin by stroke neurology. She is also on amlodipine 5 every day due to reported HTN post-infarction.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; 'None of the above' describes the headache's character.; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Post-operative evaluation best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a known brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is a history of serious head or skull, trauma or injury.ostct"	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	blurred vision, unsteadiness, tingling of arms and legs.; This study is being ordered for a neurological disorder.; headaches, spells of change in awareness, syncope.; There has not been any treatment or conservative therapy.; spells of change in awareness, syncopal spells, headaches; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 2019; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given surgery, and controlling bp and diabetes; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Given that patient had normal Echo and Carotid US, imaging is needed to further evaluate and treat new symptoms.; This study is being ordered for a neurological disorder.; 9/13/2021;Patient with history of migraines, now with new neurologic symptoms. Patient had normal Carotid US and normal Echo.; There has been treatment or conservative therapy.; Patient with history of migraines, now with other neurologic symptoms: visual symptoms and left side body symptoms (slurred speech, left side weakness and numbness). Patient had normal Echo and Carotid US.; Patient was started on 81 mg aspirin and underwent an Echocardiogram and Carotid US - both with normal results.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	May 2021 she was arising from bed and the room began to spin, suggesting vertigo. That was her first event of this. That lasted a few minutes "at least." Following this, she felt off balance, but the severe spinning had improved. She felt that way for a f; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	NOTHING FURTHER; This study is being ordered for a neurological disorder.; 2012; There has been treatment or conservative therapy.; NUMB TINGLING OF FEE=ET AND HANDS ON AND OFF, SPELLS OF CONFUSION GAIT CHANGES BEHAVIOR CHANGES AND DYSARTHRIA; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	On April 8, she had an anxiety attack presumed. She activated 911. She could not catch her breath, had a sense of doom, was freezing cold, teeth were chattering. At the ER, she got oxygen and her symptoms resolved and "felt great." No testing was done, in; This study is being ordered for a neurological disorder.; 04/2022; There has been treatment or conservative therapy.; brain fog, paralysis, insomnia, confusion, and dysarthria; pain medication, muscle relaxers, sleep aid; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	patient has varied symptoms that can not be encompassed satisfactorily by a specific etiology. This is the first volley of diagnostic testing intended to help narrow down a diagnosis for this patient who is unable to drive nor work while symptoms persist.; This study is being ordered for a neurological disorder.; Headaches since High School, but recent increase in frequency. Experiencing photophobia, phonophobia, and osmophobia, blurred vision and inability to act as she normally does during this time. First episode of loss of consciousness was 12/04. Multiple epi; There has been treatment or conservative therapy.; loss of consciousness and headaches; pt was seen in the hospital following an episode. was started on Topiramate at that time.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	pt was seen in ER sitting; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; tia, loss of vision, weakness, slurred speech.; There has been treatment or conservative therapy.; vision loss, weakness, unable to speak for 30min to 2 hours; pt was on plavix 75mg qd now is changed to brillinta 90mgbid; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	to further evaluate her carotids due to her high cholesterol, paresthesia, numbness and stroke-like symptoms.; This study is being ordered for a neurological disorder.; 8 months ago; There has not been any treatment or conservative therapy.; dizziness, jerking, numbness. Mrs. Watson explained that on Feb 10th around four in the morning, she woke up to chest pain, her limbs jerking, left sided weakness and numbness.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	wants to see if surgery is needed; This study is being ordered for Vascular Disease.; unknw; There has been treatment or conservative therapy.; vision trouble and headaches; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the brain.	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for Vascular Disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	blurred vision, unsteadiness, tingling of arms and legs.; This study is being ordered for a neurological disorder.; headaches, spells of change in awareness, syncope.; There has not been any treatment or conservative therapy.; spells of change in awareness, syncopal spells, headaches; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	earlier basilar artery 10 mm left pontine stroke that produced right-sided weakness and numbness as well as diabetic peripheral neuropathy with paresthesia and gait instability. Recall CTA of head and neck done in December 2021 demonstrated chronic left ; This study is being ordered for a neurological disorder.; 12/2021; There has been treatment or conservative therapy.; right-sided weakness and numbness; Plavix 75mg; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 2019; There has been treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given surgery, and controlling bp and diabetes; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Given that patient had normal Echo and Carotid US, imaging is needed to further evaluate and treat new symptoms.; This study is being ordered for a neurological disorder.; 9/13/2021; Patient with history of migraines, now with new neurologic symptoms. Patient had normal Carotid US and normal Echo.; There has been treatment or conservative therapy.; Patient with history of migraines, now with other neurologic symptoms: visual symptoms and left side body symptoms (slurred speech, left side weakness and numbness). Patient had normal Echo and Carotid US.; Patient was started on 81 mg aspirin and underwent an Echocardiogram and Carotid US - both with normal results.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	May 2021 she was arising from bed and the room began to spin, suggesting vertigo. That was her first event of this. That lasted a few minutes "at least." Following this, she felt off balance, but the severe spinning had improved. She felt that way for a f; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	NOTHING FURTHER; This study is being ordered for a neurological disorder.; 2012; There has been treatment or conservative therapy.; NUMB TINGLING OF FEE=ET AND HANDS ON AND OFF, SPELLS OF CONFUSION GAIT CHANGES BEHAVIOR CHANGES AND DYSARTHRIA; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	On April 8, she had an anxiety attack presumed. She activated 911. She could not catch her breath, had a sense of doom, was freezing cold, teeth were chattering. At the ER, she got oxygen and her symptoms resolved and "felt great." No testing was done, in; This study is being ordered for a neurological disorder.; 04/2022; There has been treatment or conservative therapy.; brain fog, paralysis, insomnia, confusion, and dysarthria; pain medication, muscle relaxers, sleep aid; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	patient has varied symptoms that can not be encompassed satisfactorily by a specific etiology. This is the first volley of diagnostic testing intended to help narrow down a diagnosis for this patient who is unable to drive nor work while symptoms persist.; This study is being ordered for a neurological disorder.; Headaches since High School, but recent increase in frequency. Experiencing photophobia, phonophobia, and osmophobia, blurred vision and inability to act as she normally does during this time. First episode of loss of consciousness was 12/04. Multiple epi; There has been treatment or conservative therapy.; loss of consciousness and headaches; pt was seen in the hospital following an episode. was started on Topiramate at that time.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	pt was seen in ER sitting; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; tia, loss of vision, weakness, slurred speech; There has been treatment or conservative therapy.; vision loss, weakness, unable to speak for 30min to 2 hours; pt was on plavix 75mg qd now is changed to brillinta 90mgbid; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	to further evaluate her carotids due to her high cholesterol, paresthesia, numbness and stroke-like symptoms.; This study is being ordered for a neurological disorder.; 8 months ago; There has not been any treatment or conservative therapy.; dizziness, jerking, numbness. Mrs. Watson explained that on Feb 10th around four in the morning, she woke up to chest pain, her limbs jerking, left sided weakness and numbness.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	wants to see if surgery is needed; This study is being ordered for Vascular Disease.; unknw; There has been treatment or conservative therapy.; vision trouble and headaches; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	; It is unknown if there is a suspicion of an infection or abscess.; It is unknown if this examination is being requested to evaluate lymphadenopathy or mass.; It is unknown if there is a suspicion of a bone infection (osteomyelitis); There is NOT a suspicion of an orbit or face neoplasm, tumor, or metastasis.; This is a request for an Orbit MRI.; There is not a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	monitor progression of right optic glioma in patient with neurofibromatosis type 1 and new onset persistent headache; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Optic neuropathy; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	This is a request for an Orbit MRI.; There is a history of orbit or face trauma or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	; It is unknown if there is a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has NOT been a recent (less than 2 week) neck or carotid artery ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	61-year-old gentleman with probable thalamic infarct on the left.; This study is being ordered for Vascular Disease.; morning of January 12 2022; There has been treatment or conservative therapy.; his arm leg and face on the right side were numb; He went to the doctor later that morning. He had a CT scan done on January 28. Ultimately it was unrevealing. Start aspirin. I am also going to start atorvastatin 40; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	Further evaluation and treatment of a stroke work up. CTA of head and neck cannot be ordered due to a shortage of contrast. Radiology is recommending MRA. ;Patient also has aphasia as a late effect of CVA; There is NOT a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has NOT been a recent (less than 2 week) neck or carotid artery ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	parkinson disease; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	please see clinicals; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	Pt is having dizziness and sundowners with Hallucinations and is also falling; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	RLE weakness, CTH with hypodensity;concern for stroke on CTH; There is NOT a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has NOT been a recent (less than 2 week) neck or carotid artery ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	see clinicals; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	SINCE DIAGNOSED WITH MOYAMOYA PT HAS NOT FOLLOWED UP WITH VASCULAR NEUROSURGEON NEEDS EVALUATION DONE PRIOR TO MAKING A DECISION REGARDING SURGERY ON CERVICAL SPINE; This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; STROKE LIKE SYMPTOMS/NUMBNLESS TINGLING; PHYSICAL THERAPY AND MEDICATIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	Stroke, follow up Brain mass or lesion, follow-up; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 07/10/2021; It is not known if there has been any treatment or conservative therapy.; Stroke, follow up Brain mass or lesion, follow-upEvaluation for Multiple Sclerosis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	syncope; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is an immediate family history of aneurysm.; This is a request for a Brain MRA.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has been a stroke or TIA within the past 2 weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is not an immediate family history of aneurysm.; The patient has a known aneurysm.; This is a request for a Brain MRA.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	thunderclap headache that has gotten worse within 6 months, left sided weakness; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	will be faxed; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 8/30/2021; It is not known if there has been any treatment or conservative therapy.; will be faxed; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	; It is unknown if there is a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has NOT been a recent (less than 2 week) neck or carotid artery ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	61-year-old gentleman with probable thalamic infarct on the left.; This study is being ordered for Vascular Disease.; morning of January 12 2022; There has been treatment or conservative therapy.; his arm leg and face on the right side were numb; He went to the doctor later that morning. He had a CT scan done on January 28. Ultimately it was unrevealing. Start aspirin. I am also going to start atorvastatin 40; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	Further evaluation and treatment of a stroke work up. CTA of head and neck cannot be ordered due to a shortage of contrast. Radiology is recommending MRA. ;Patient also has aphasia as a late effect of CVA; There is NOT a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has NOT been a recent (less than 2 week) neck or carotid artery ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	RLE weakness, CTH with hypodensity;concern for stroke on CTH; There is NOT a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.; There has NOT been a recent (less than 2 week) neck or carotid artery ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	rule out carotid or vertebral artery occlusion; This is a request for a Neck MR Angiography.; The patient has NOT had an onset of neurologic symptoms within the last two weeks.; The patient has NOT been diagnosed with Coarctation of the aorta, Marfan's syndrome, Neurofibromatosis, or Moyamoya disease.; The patient had an ultrasound (doppler) of the neck or carotid arteries.; It is unknown if the the ultrasound showed dissection, stenosis or a glomus tumor.; The patient does not have carotid (neck) artery surgery.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	Stroke, follow up Brain mass or lesion, follow-up; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 07/10/2021; It is not known if there has been any treatment or conservative therapy.; Stroke, follow up Brain mass or lesion, follow-upEvaluation for Multiple Sclerosis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70547 Magnetic resonance angiography, neck; without contrast material(s)	There is a family history of a brain aneurysm in the parent, brother, sister or child of the patient.; This is a request for a Brain and Neck MRA combination.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; There has been treatment or conservative therapy.; ; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Michael Hale is a 63 y.o. male with PMHx of DM , HTN ,CABAG, ESRD on dialysis since last year presented to the clinic for pretransplant surgical clearance.Patient was seen in the Neurology clinic here at UAMS in 2018 for the concern of abnormal MRI brain ; It is not known if there has been any treatment or conservative therapy.; Michael Hale is a 63 y.o. male with PMHx of DM , HTN ,CABAG, ESRD on dialysis since last year presented to the clinic for pretransplant surgical clearance.Patient was seen in the Neurology clinic here at UAMS in 2018 for the concern of abnormal MRI brain ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	5/4/2019; There has been treatment or conservative therapy.; NECK PAIN, DAILY HEADACHS, DIZZINESS; FOLOW UP WITH PAIN MANAGEMENT DOCTOR FOR NECK; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	5/13/2022; There has been treatment or conservative therapy.; Reports of balance issues and now they are getting worse. Wife reports she is with him for last 22 years and now lately patient is getting more slow and balance issues getting worse.;He was told he might be having parkinsonism. Patient reports he is also; acetaminophen (TYLENOL) 500 MG tablet;Take 500 mg by mouth every 6 (six) hours as needed for pain.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	61-year-old gentleman with probable thalamic infarct on the left.; This study is being ordered for Vascular Disease.; morning of January 12 2022; There has been treatment or conservative therapy.; his arm leg and face on the right side were numb; He went to the doctor later that morning. He had a CT scan done on January 28. Ultimately it was unrevealing. Start aspirin. I am also going to start atorvastatin 40; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	earlier basilar artery 10 mm left pontine stroke that produced right-sided weakness and numbness as well as diabetic peripheral neuropathy with paresthesia and gait instability. Recall CTA of head and neck done in December 2021 demonstrated chronic left ; This study is being ordered for a neurological disorder.; 12/2021; There has been treatment or conservative therapy.; right-sided weakness and numbness; Plavix 75mg; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Eboniee L Burks with pulmonary sarcoidosis diagnosed by pulmonologist in 2021 had a myelitis and lesions in the brain, with increased ACE in spinal fluid, therefore she has systemic sarcoidosis with neurological involvement.; This study is being ordered for Inflammatory/ Infectious Disease.; 2021; There has been treatment or conservative therapy.; numbness in legs, progressed to paraplegia as of feb 2022, CSF with increased ACE in the spinal fluid; She was treated with solumedrol resumed again on prednisone and she did not clinically improved.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 10/26/2021; There has been treatment or conservative therapy.; chronic back pain, motor deficits, abnormal reflexes; medications, home excercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	May 2021 she was arising from bed and the room began to spin, suggesting vertigo. That was her first event of this. That lasted a few minutes "at least." Following this, she felt off balance, but the severe spinning had improved. SHe felt that way for a f; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	MRI brain, MRI cervical and thoracic spine for evaluation of hyper reflexia and progressive gait unsteadiness; This study is being ordered for a neurological disorder.; 2020;Patient reported that for last 1-2 years, she has been noticing slowly progressive gait unsteadiness, poor balance; There has been treatment or conservative therapy.; progressive muscle weakness, proximal more than distal, significant for myalgias, imbalance and fatigue, diffuse hyper reflexia with positive Hoffman on the right side.; Patient has been using crutches and walker at home and using Wheelchair for long distance.;She was started on Medrol Dosepak twice. She just finished the 2nd dose of Medrol Dosepak.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Neoplasm: head WM lesion L frontal lobe in patient with seizures. Demyelinating disease X Brain tumor (most likely); This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Optic neuropathy; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient has continuing symptoms of syncope and collapse, had negative cardiac workup. Imaging is needed to further evaluate and treat.; This study is being ordered for a neurological disorder.; August 2020; There has been treatment or conservative therapy.; Syncope and collapse, vomiting, seizure-like activity, lightheaded, sweats/hot flashes.; Patient has undergone complete Cardiac workup, including 30 day holter monitor; workup negative for cardiac issues.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	patient is experiencing multi issues will send fax; There has not been any treatment or conservative therapy.; weakness, essential hypertension; This study is being ordered for Neurological Disorder progressively worsening; This study is being ordered for a neurological disorder.; 2 YEARS PROGRESSIVELY WORSENING; There has been treatment or conservative therapy.; numbness and weakness along with ataxia abnormal reflex; physical therapy and medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	pt was seen in ER sitting; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; tia, loss of vision, weakness, slurred speech.; There has been treatment or conservative therapy.; vision loss, weakness, unable to speak for 30min to 2 hours; pt was on plavix 75mg qd now is changed to brillinta 90mgbid; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	seizure/paresthesia; There has not been any treatment or conservative therapy.; seizure; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	SINCE DIAGNOSED WITH MOYAMOYA PT HAS NOT FOLLOWED UP WITH VASCULAR NEUROSURGEON NEEDS EVALUATION DONE PRIOR TO MAKING A DECISION REGARDING SURGERY ON CERVICAL SPINE; This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; STROKE LIKE SYMPTOMS/NUMBNLESS TINGLING; PHYSICAL THERAPY AND MEDICATIONS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Stroke, follow up Brain mass or lesion, follow-up; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 07/10/2021; It is not known if there has been any treatment or conservative therapy.; Stroke, follow up Brain mass or lesion, follow-upEvaluation for Multiple Sclerosis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is not a suspected Acoustic Neuroma or tumor of the inner or middle ear.; There is not a suspected cholesteatoma of the ear.; The patient has not had a recent brain CT or MRI within the last 90 days.; There are neurologic symptoms or deficits such as one-sided weakness, speech impairments, vision defects or sudden onset of severe dizziness.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; Chronic headache, longer than one month describes the headache's character.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Headache best describes the reason that I have requested this test.; New onset within the past month describes the headache's character.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected multiple sclerosis (MS) best describes the reason that I have requested this test.; The patient has been diagnosed with known Multiple Sclerosis.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected TIA (stroke) best describes the reason that I have requested this test.; There are documented localizing neurologic findings.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; None of the above best describes the reason that I have requested this test.; Known or suspected Parkinson's disease best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is not presenting with a sudden change in severity, associated with exertion, or a mental status change.; There are recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is presenting with a sudden change in severity, associated with exertion, or a mental status change.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have a sudden severe, chronic or recurring or a thunderclap headache.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	Apr-Jun 31 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 62 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 63 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a sudden and severe headache.; The patient has NOT had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has vision changes.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.; The patient has NOT had a Brain MRI in the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.; The patient has NOT had a Brain MRI in the last 12 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 10 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 9 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient had a memory assessment for cognitive impairment completed; The patient does NOT have normal results of B12, TSH and other metabolic labs	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient had a memory assessment for cognitive impairment completed; The patient has normal results of B12, TSH and other metabolic labs	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment; The patient had labs completed, including B12, TSH (Thyroid-stimulating hormone), CBC (Complete Blood Count), and CMP (Comprehensive Metabolic Panel)	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment; The patient has NOT had labs completed, including B12, TSH (Thyroid-stimulating hormone), CBC (Complete Blood Count), and CMP (Comprehensive Metabolic Panel)	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a memory assessment for cognitive impairment completed	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is NOT a new/initial evaluation	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is associated with headache, blurred or double vision or a change in sensation noted on exam.; The patient is experiencing fatigue or malaise.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The patient has undergone treatment for a congenital abnormality (such as hydrocephalus or craniosynostosis).; The patient has a congenital abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of Multiple Sclerosis; The patient has undergone treatment for multiple sclerosis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of seizures; There has been a previous Brain MRI completed.; The brain MRI was abnormal.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of seizures; There has not been a previous Brain MRI completed.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of seizures; There has not been a previous Brain MRI completed.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of stroke or aneurysm; There are recent neurological symptoms such as one sided weakness, speech impairments, or vision defects.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).; The patient has NOT had a Brain MRI in the last 6 months	Apr-Jun 6 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the last 12 months	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the past 10 months.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; This study is being ordered as a 12 month annual follow up.; This is a routine follow up.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; This study is NOT being ordered as a 12 month annual follow up.; This is a routine follow up.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Parkinson's disease.; The neurologic symptoms include one sided arm or leg weakness.; This study is being ordered for new neurological symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Parkinson's disease.; The neurologic symptoms include something other than worsening Parkinson symptoms, dizziness, vision changes, one sided arm or leg weakness, or the inability to speak.; This study is being ordered for new neurological symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Parkinson's disease.; The neurologic symptoms include worsening Parkinson's symptoms.; This study is being ordered for new neurological symptoms.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Parkinson's disease.; This study is being ordered for a new diagnosis of Parkinson's.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; It is unknown if there has there been a change in seizure pattern or a new seizure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	46	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	47	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has NOT been a change in seizure pattern or a new seizure.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This study is being ordered for a neurological disorder.; Around 8 months ago; There has not been any treatment or conservative therapy.; vision blurs;dizzy;loses consciousness;face feels numb;heavy arms and legs; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This study is being ordered for Inflammatory / Infectious Disease	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	To evaluate for NEDA, patient will need to repeat her Brain MRI;;She now has much more complains related with spinal cord lesions, therefore, she should not only have MRI brain follow up, but also MRI spinal cord to evaluate current disease involvement.; This study is being ordered for a neurological disorder.; 2002; There has been treatment or conservative therapy.; numbness on ring and pinky of left hand that has been present for about 3 years;;Reports intermittent burning sensation in bilateral lower extremities, worse on bottom of feet;;recently developed difficulty swallowing, vertigo, burning sensation in ri; Current disease course: copaxone ;;Previous disease therapies: Betaseron, Copaxone, Tecfidera, Aubagio; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	will be faxed; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 8/30/2021; It is not known if there has been any treatment or conservative therapy.; will be faxed; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	will fax; This study is being ordered for a neurological disorder.; dont know; There has been treatment or conservative therapy.; headache and neck pain ans astrio ateritis; physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	WILL SEND CLINICALS; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; WILL SEND CLINICALS; It is not known if there has been any treatment or conservative therapy.; WILL SEND CLINICALS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	worsening headaches, chronic/recurring. no prior brain imaging. normal neuro exam. neurologist eval; This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is not presenting with a sudden change in severity, associated with exertion, or a mental status change; There are not recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.; There is not a family history (parent, sibling or child of the patient) of AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Lower extremity weakness.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to neurological deficits.; The patient is experiencing or presenting symptoms of lower extremity weakness.; There is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is to be part of a Myelogram.; This is a request for a Cervical Spine CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	;; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	;; There has not been any treatment or conservative therapy.; ; This study is being ordered for Multiple Sclerosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	;; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	5/4/2019; There has been treatment or conservative therapy.; NECK PAIN, DAILY HEADACHS, DIZZINESS; FOLOW UP WITH PAIN MANAGEMENT DOCTOR FOR NECK; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	5/13/2022; There has been treatment or conservative therapy.; Reports of balance issues and now they are getting worse. Wife reports she is with him for last 22 years and now lately patient is getting more slow and balance issues getting worse.;He was told he might be having parkinsonism. Patient reports he is also; acetaminophen (TYLENOL) 500 MG tablet;Take 500 mg by mouth every 6 (six) hours as needed for pain.; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Benign neoplasm, brain or parts CNS ;patient with VHL post laminectomy with worse pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Ebonie L Burks with pulmonary sarcoidosis diagnosed by pulmonologist in 2021 had a myelitis and lesions in the brain, with increased ACE in spinal fluid, therefore she has systemic sarcoidosis with neurological involvement.; This study is being ordered for Inflammatory/ Infectious Disease.; 2021; There has been treatment or conservative therapy.; numbness in legs, progressed to paraplegia as of feb 2022, CSF with increased ACE in the spinal fluid; She was treated with solumedrol resumed again on prednisone and she did not clinically improved.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	faxing clinical; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	MRI brain, MRI cervical and thoracic spine for evaluation of hyper reflexia and progressive gait unsteadiness; This study is being ordered for a neurological disorder.; 2020;Patient reported that for last 1-2 years, she has been noticing slowly progressive gait unsteadiness, poor balance; There has been treatment or conservative therapy.; progressive muscle weakness, proximal more than distal, significant for myalgias, imbalance and fatigue, diffuse hyper reflexia with positive Hoffman on the right side.; Patient has been using crutches and walker at home and using Wheelchair for long distance.;She was started on Medrol Dosepak twice. She just finished the 2nd dose of Medrol Dosepak.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	patient is experiencing multi issues will send fax; There has not been any treatment or conservative therapy.; weakness, essential hypertension; This study is being ordered for Neurological Disorder progressively worsening; This study is being ordered for a neurological disorder.; 2 YEARS PROGRESSIVELY WORSENING; There has been treatment or conservative therapy.; numbness and weakness along with ataxia abnormal reflex; physical therapy and medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Pt diagnosed with NMO has previously had lesions on C and T spine. With new symptoms of leg and arm heaviness, tight feeling on arms, urinary difficulty, and fatigue we would like to do follow up MRIs to see if any new lesion activity is noted.; 11/2019; There has been treatment or conservative therapy.; Leg and arm heaviness, urinary difficulty, fatigue.; Oral medication methotrexate.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Dr.Chenault tried to start her on IV treatment of Rituxan but insurance would not cover until oral medications were tried.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	seizure/paresthesia; There has not been any treatment or conservative therapy.; seizure; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	5	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The patient has a new onset or changing radiculitis / radiculopathy; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had a diagnostic test (such as an EMG/nerve conduction) involving the cervical spine	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Abnormal Reflexes	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	5	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; For evaluation of a syrinx or syringomyelia (a fluid filled hole within the spinal column) describes the reason for requesting this procedure.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; Multiple Sclerosis describes the reason for requesting this procedure.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for Inflammatory / Infectious Disease	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	To evaluate for NEDA, patient will need to repeat her Brain MRI;;She now has much more complains related with spinal cord lesions, therefore, she should not only have MRI brain follow up, but also MRI spinal cord to evaluate current disease involvement.; This study is being ordered for a neurological disorder.; 2002; There has been treatment or conservative therapy.; numbness on ring and pinky of left hand that has been present for about 3 years;;Reports intermittent burning sensation in bilateral lower extremities, worse on bottom of feet;;recently developed difficulty swallowing, vertigo, burning sensation in ri; Current disease course: copaxone ;;Previous disease therapies: Betaseron, Copaxone, Tecfidera, Aubagio; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	We will proceed expeditiously with MRI C-spine discussed with patient that he should not fall or any other injuries which would aggravate if we are dealing with cervical stenosis. If more suspicious for demyelinating process then will need further evalua; Myelopathy, acute or progressive; There has been treatment or conservative therapy.; myelopathy with upper and lower extremity weakness numbness and spasticity. I suspect probably were dealing with cervical myelopathy with possible stenosis although differential would include structural lesion like a tumor although demyelinating process ; Physical therapy, medication; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics will fax; This study is being ordered for a neurological disorder.; dont know; There has been treatment or conservative therapy.; headache and neck pain ans astrio ateritis; physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	WILL SEND CLINICALS; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; WILL SEND CLINICALS; It is not known if there has been any treatment or conservative therapy.; WILL SEND CLINICALS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology ; ; There has not been any treatment or conservative therapy.; ; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	WILL SEND CLINICALS; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; WILL SEND CLINICALS; It is not known if there has been any treatment or conservative therapy.; WILL SEND CLINICALS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology ; ; There has not been any treatment or conservative therapy.; ; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Eboniee L Burks with pulmonary sarcoidosis diagnosed by pulmonologist in 2021 had a myelitis and lesions in the brain, with increased ACE in spinal fluid, therefore she has systemic sarcoidosis with neurological involvement.; This study is being ordered for Inflammatory/ Infectious Disease.; 2021; There has been treatment or conservative therapy.; numbness in legs, progressed to paraplegia as of feb 2022, CSF with increased ACE in the spinal fluid; She was treated with solumedrol resumed again on prednisone and she did not clinically improved.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder ; 10/26/2021; There has been treatment or conservative therapy.; chronic back pain, motor deficits, abnormal reflexes; medications, home excercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	faxing clinical; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	MRI brain, MRI cervical and thoracic spine for evaluation of hyper reflexia and progressive gait unsteadiness; This study is being ordered for a neurological disorder.; 2020;Patient reported that for last 1-2 years, she has been noticing slowly progressive gait unsteadiness, poor balance; There has been treatment or conservative therapy.; progressive muscle weakness, proximal more than distal, significant for myalgias, imbalance and fatigue, diffuse hyper reflexia with positive Hoffman on the right side.; Patient has been using crutches and walker at home and using Wheelchair for long distance;;She was started on Medrol Dosepak twice. She just finished the 2nd dose of Medrol Dosepak.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology progressively worsening; This study is being ordered for a neurological disorder.; 2 YEARS PROGRESSIVELY WORSENING; There has been treatment or conservative therapy.; numbness and weakness along with ataxia abnormal reflex; physical therapy and medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	progressively worsening; This study is being ordered for a neurological disorder.; 2 YEARS PROGRESSIVELY WORSENING; There has been treatment or conservative therapy.; numbness and weakness along with ataxia abnormal reflex; physical therapy and medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Pt diagnosed with NMO has previously had lesions on C and T spine. With new symptoms of leg and arm heaviness, tight feeling on arms, urinary difficulty, and fatigue we would like to do follow up MRIs to see if any new lesion activity is noted.; 11/2019; There has been treatment or conservative therapy.; Leg and arm heaviness, urinary difficulty, fatigue.; Oral medication methotrexate. Dr.Chenault tried to start her on IV treatment of Rituxan but insurance would not cover until oral medications were tried.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; please see clinicals	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; Patient has severe spasticity particular in the lower extremities with sustained clonus and frequent "jerking" of the legs which appears to be a severe clonus situation. She is unable to flex her legs. She is wheelchair/bedbound. She uses a bedpan. Sh	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for a neurological disorder.; MULTIPLE SCLEROSIS.. WORSENING SYMPTOMS AND PAIN IN THE LAST 12MONTHS; There has been treatment or conservative therapy.; MULTIPLE SCLEROSIS. RADICULOPATHY, THORACIC AND LUMBAR. WORSENING FATIGUE. DIZZINESS, LESIONS IN THE BRAIN CONSISTENT WITH MS. WORSENING PAIN; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	To evaluate for NEDA, patient will need to repeat her Brain MRI;;She now has much more complains related with spinal cord lesions, therefore, she should not only have MRI brain follow up, but also MRI spinal cord to evaluate current disease involvement.; This study is being ordered for a neurological disorder.; 2002; There has been treatment or conservative therapy.; numbness on ring and pinky of left hand that has been present for about 3 years;;Reports intermittent burning sensation in bilateral lower extremities, worse on bottom of feet;;recently developed difficulty swallowing, vertigo, burning sensation in ri; Current disease course: copaxone ;;Previous disease therapies: Betaseron, Copaxone, Tecfidera, Aubagio; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	UNKNOWN; This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; UNKNOWN; UNKNOWN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Benign neoplasm, brain or parts CNS ;patient with VHL post laminectomy with worse pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 10/26/2021; There has been treatment or conservative therapy.; chronic back pain, motor deficits, abnormal reflexes; medications, home exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Given patient's continued decline and physical exam - imaging is needed to further evaluate and treat.; Patient diagnosed with spastic hemiparesis 15 years ago, symptoms began to be much worse. Patient is currently in a wheelchair, can ambulate with walker/can with assistance. Patients symptoms continue to worsen, provider would like imaging to evaluate f; There has not been any treatment or conservative therapy.; Lower extremity weakness, decreased sensation, diminished reflexes, abnormal gait and stance; bilateral lower extremities.; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	proximal weakness with history of growing fibromas causing gait dysfunction; This study is being ordered for Congenital Anomaly.; diagnosis of NF1 when she was 21 years old in the context of fibromas that were enlarging when she was pregnant; It is not known if there has been any treatment or conservative therapy.; proximal weakness with history of growing fibromas causing gait dysfunction; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; Something other than listed has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Follow-up to surgery or fracture within the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Recent evidence of fracture documented by x-ray	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Unilateral focal muscle wasting	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has Other; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Physical exam findings consistent with myelopathy; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for a neurological disorder.; MULTIPLE SCLEROSIS.. WORSENING SYMPTOMS AND PAIN IN THE LAST 12MONTHS; There has been treatment or conservative therapy.; MULTIPLE SCLEROSIS. RADICULOPATHY, THORACIC AND LUMBAR. WORSENING FATIGUE. DIZZINESS, LESIONS IN THE BRAIN CONSISTENT WITH MS. WORSENING PAIN; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	proximal weakness with history of growing fibromas causing gait dysfunction; This study is being ordered for Congenital Anomaly.; diagnosis of NF1 when she was 21 years old in the context of fibromas that were enlarging when she was pregnant; It is not known if there has been any treatment or conservative therapy.; proximal weakness with history of growing fibromas causing gait dysfunction; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc.; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis., The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	76390 Magnetic resonance spectroscopy	Neoplasm: head WM lesion L frontal lobe in patient with seizures. Demyelinating disease X BBrain tumor (most likely); This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	78608 Brain imaging, positron emission tomography (PET); metabolic evaluation	This is a request for a Metabolic Brain PET scan; This study is being ordered for refractory seizures.; This study is being ordered for pre-surgical evaluation.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	NOTHING FURTHER; This study is being ordered for a neurological disorder.; 2012; There has been treatment or conservative therapy.; NUMB TINGLING OF FEE=ET AND HANDS ON AND OFF, SPELLS OF CONFUSION GAIT CHANGES BEHAVIOR CHANGES AND DYSARTHRIA; MEDICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of the aorta or major veins arteries related to the heart.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; There has been a change in clinical status since the last echocardiogram.; It is unknown if this is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Embolism.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for initial diagnosis of congenital heart disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; she suffered a stroke and was taken to an OSH in mid-2021. Prior to her stroke she was not aware that she had moyamoya; There has been treatment or conservative therapy.; She endorses R shoulder, arm, and hip pain. She has dependent edema attributed to the amlodipine. suffer from occasional bladder incontinence and inappropriate behavior as well as marked developmental regression. She no longer has focal weakness or crania; Eliquis after the stroke but this was changed to Aspirin by stroke neurology. She is also on amlodipine 5 every day due to reported HTN post-infarction.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; New onset of seizures or newly identified change in seizure activity or pattern best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a known brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is a Medicare member.; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for a neurological disorder.; Around 8 months ago; There has not been any treatment or conservative therapy.; vision blurs;dizzy;loses consciousness;face feels numb;heavy arms and legs; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for a neurological disorder.; Around 8 months ago; There has not been any treatment or conservative therapy.; vision blurs;dizzy;loses consciousness;face feels numb;heavy arms and legs; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	CTA for possible cerebellar etiologies; This study is being ordered for a neurological disorder.; 9 weeks ago; There has been treatment or conservative therapy.; rapid onset of dizziness;caused him to black out;also vomited;weak; Sent to ENT and cardiologist with no explanation for altered consciousness; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	earlier basilar artery 10 mm left pontine stroke that produced right-sided weakness and numbness as well as diabetic peripheral neuropathy with paresthesia and gait instability. Recall CTA of head and neck done in December 2021 demonstrated chronic left i; This study is being ordered for a neurological disorder.; 12/2021; There has been treatment or conservative therapy.; right-sided weakness and numbness; Plavix 75mg; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; unknown; There has been treatment or conservative therapy.; memory lossTIA weaknessconfusiontrouble putting words together; medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Last CTA on 1/13/22 compared to CTA on 10/14/21 shows worsening luminal irregularity with moderate, approximately 60% stenosis of the V2 segment right vertebral artery at C4 & C5 level.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; initial onset was 9/8/2021; There has been treatment or conservative therapy.; 4 month CTA Brain & Neck evaluation to check stability of stenosis which was worsening per the CTA done on 1/13/22; taking Eliquis 5 mg two times a day and Aspirin 81 mg one time a day; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Muscle weakness; This study is being ordered for trauma or injury.; 11/19/2021; There has been treatment or conservative therapy.; Numbness,tingling,muscle twiching,dizziness,headaches, sleep disturbance. Light headed on standing; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for a neurological disorder.; 01/11/2022; There has not been any treatment or conservative therapy.; right sided weakness, holding things in her hands.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	CTA for possible cerebellar etiologies; This study is being ordered for a neurological disorder.; 9 weeks ago; There has been treatment or conservative therapy.; rapid onset of dizziness;caused him to black out;also vomited;weak; Sent to ENT and cardiologist with no explanation for altered consciousness; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; unknown; There has been treatment or conservative therapy.; memory lossTIA weaknessconfusiontrouble putting words together; medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Last CTA on 1/13/22 compared to CTA on 10/14/21 shows worsening luminal irregularity with moderate, approximately 60% stenosis of the V2 segment right vertebral artery at C4 & C5 level.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; initial onset was 9/8/2021; There has been treatment or conservative therapy.; 4 month CTA Brain & Neck evaluation to check stability of stenosis which was worsening per the CTA done on 1/13/22; taking Eliquis 5 mg two times a day and Aspirin 81 mg one time a day; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Muscle weakness; This study is being ordered for trauma or injury.; 11/19/2021; There has been treatment or conservative therapy.; Numbness,tingling,muscle twitching,dizziness,headaches, sleep disturbance. Light headed on standing; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for a neurological disorder.; 01/11/2022; There has not been any treatment or conservative therapy.; right sided weakness, holding things in her hands.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for trauma or injury.; 10-20-2021; There has been treatment or conservative therapy.; Migraine, Redness and swelling in the eye. Distorted vision. Chest Pain.; PT and Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	will fax; This study is being ordered for a neurological disorder.; dont know; There has been treatment or conservative therapy.; headace and neck pain ans astrio ateritis; physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70544 Magnetic resonance angiography, head; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Patient has continuing symptoms of syncope and collapse, had negative cardiac workup. Imaging is needed to further evaluate and treat.; This study is being ordered for a neurological disorder.; August 2020; There has been treatment or conservative therapy.; Syncope and collapse, vomiting, seizure-like activity, lightheaded, sweats/hot flashes.; Patient has undergone complete Cardiac workup, including 30 day holter monitor: workup negative for cardiac issues.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70547 Magnetic resonance angiography, neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Patient has continuing symptoms of syncope and collapse, had negative cardiac workup. Imaging is needed to further evaluate and treat.; This study is being ordered for a neurological disorder.; August 2020; There has been treatment or conservative therapy.; Syncope and collapse, vomiting, seizure-like activity, lightheaded, sweats/hot flashes.; Patient has undergone complete Cardiac workup, including 30 day holter monitor: workup negative for cardiac issues.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70547 Magnetic resonance angiography, neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	please see clinicals; This is a request for a Neck MR Angiography.; The patient has dizziness.; The patient had an onset of neurologic symptoms within the last two weeks.; The patient has NOT had an ultrasound (doppler) of the neck or carotid arteries.; The patient does not have carotid (neck) artery surgery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70547 Magnetic resonance angiography, neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	stroke follow up.; This is a request for a Neck MR Angiography.; The patient has NOT had an onset of neurologic symptoms within the last two weeks.; The patient has NOT been diagnosed with Coarctation of the aorta, Marfan's syndrome, Neurofibromatosis, or Moya-moya disease.; The patient has NOT had an ultrasound (doppler) of the neck or carotid arteries.; The patient does not have carotid (neck) artery surgery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70547 Magnetic resonance angiography, neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Neck MR Angiography.; The patient has the inability to speak.; The patient had an onset of neurologic symptoms within the last two weeks.; The patient has NOT had an ultrasound (doppler) of the neck or carotid arteries.; The patient does not have carotid (neck) artery surgery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	Initial onset date: 8/29/2021; There has been treatment or conservative therapy.; Patient continues to experience pain, numbness and tingling to left side of body despite PT and medication management.; Patient completed physical therapy and is currently taking atorvastatin 40mg and aspirin 81mg daily.; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	long standing headaches but had gotten better for a while before restarting this year. She reported that she had about 3 wks period of constant headache couple of months back and now again having mild headaches nearly daily. ;they are mostly on the R sid; There has been treatment or conservative therapy.; long standing headaches but had gotten better for a while before restarting this year. She reported that she had about 3 wks period of constant headache couple of months back and now again having mild headaches nearly daily. Previously she has had mild na; flexeril for PRN;Tizanidine as needed for headaches;neck exercises;Trial of Nort 25mg HS;TakeTylenol 650 mg or advil/motrin 600 mg at the onset of headache and can repeat every 8 hours as needed; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	New MS flareup suspected; This study is being ordered for a neurological disorder.; 2018 - date of onset; There has been treatment or conservative therapy.; pain and burning sensation in full left leg, increased weakness in left leg; Ocrevus infusions - first dose 11/30/2021; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	The patient is NOT demonstrating unilateral muscle wasting/weakness; There are NO abnormal reflexes on exam; This study is being ordered for Multiple Sclerosis; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Known or suspected multiple sclerosis (MS) best describes the reason that I have requested this test.; The patient has suspected Multiple Sclerosis.; Other causes have NOT been ruled out.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has fatigue or malaise	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient had a memory assessment for cognitive impairment completed; The patient does NOT have normal results of B12, TSH and other metabolic labs	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment; The patient has NOT had labs completed, including B12, TSH (Thyroid-stimulating hormone), CBC (Complete Blood Count), and CMP (Comprehensive Metabolic Panel)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has NOT had a memory assessment for cognitive impairment completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; This study is NOT being ordered as a 12 month annual follow up.; This is a routine follow up.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure. unknown; This study is being ordered for a neurological disorder.; 01/11/2022; There has not been any treatment or conservative therapy.; right sided weakness, holding things in her hands.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for trauma or injury.; 10-20-2021; There has been treatment or conservative therapy.; Migraine, Redness and swelling in the eye. Distorted vision. Chest Pain.; PT and Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgically Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; unknown; There has been treatment or conservative therapy.; memory lossTIA weaknessconfusiontrouble putting words together; medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	UNKNOWN; This study is being ordered for a neurological disorder.; UNKNOWN; There has been treatment or conservative therapy.; UNKNOWN; UNKNOWN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	The patient does not have any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	This study is to be part of a Myelogram.; This is a request for a Cervical Spine CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72128 Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	The patient does not have any neurological deficits.; This is a request for a thoracic spine CT.; There has been a supervised trial of conservative management for at least 6 weeks.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Michael Hale is a 63 y.o. male with PMHx of DM , HTN ,CABAG, ESRD on dialysis since last year presented to the clinic for pretransplant surgical clearance.Patient was seen in the Neurology clinic here at UAMS in 2018 for the concern of abnormal MRI brain ; It is not known if there has been any treatment or conservative therapy.; Michael Hale is a 63 y.o. male with PMHx of DM , HTN ,CABAG, ESRD on dialysis since last year presented to the clinic for pretransplant surgical clearance.Patient was seen in the Neurology clinic here at UAMS in 2018 for the concern of abnormal MRI brain ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Given patient's continued decline and physical exam - imaging is needed to further evaluate and treat.; Patient diagnosed with spastic hemiparesis 15 years ago, symptoms began to be much worse. Patient is currently in a wheelchair, can ambulate with walker/can with assistance. Patients symptoms continue to worsen, provider would like imaging to evaluate f; There has not been any treatment or conservative therapy.; Lower extremity weakness, decreased sensation, diminished reflexes, abnormal gait and stance; bilateral lower extremities.; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Initial onset date: 8/29/2021; There has been treatment or conservative therapy.; Patient continues to experience pain, numbness and tingling to left side of body despite PT and medication management.; Patient completed physical therapy and is currently taking atorvastatin 40mg and aspirin 81mg daily.; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	long standing headaches but had gotten better for a while before restarting this year. She reported that she had about 3 wks period of constant headache couple of months back and now again having mild headaches nearly daily. ;they are mostly on the R sid; There has been treatment or conservative therapy.; long standing headaches but had gotten better for a while before restarting this year. She reported that she had about 3 wks period of constant headache couple of months back and now again having mild headaches nearly daily. Previously she has had mild na; flexeril for PRN;Tizanidine as needed for headaches;neck exercises;Trial of Nort 25mg HS;TakeTylenol 650 mg or advil/motrin 600 mg at the onset of headache and can repeat every 8 hours as needed; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	The patient is NOT demonstrating unilateral muscle wasting/weakness; There are NO abnormal reflexes on exam; This study is being ordered for Multiple Sclerosis; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had a diagnostic test (such as an EMG/nerve conduction) involving the cervical spine	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a neurological deficit; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for a neurological disorder.; tremor and maybe some ataxia.;loss of full control of bodily movements; There has been treatment or conservative therapy.; 2/23/2021 patient was reported to have a severe injury, close fracture of shaft of left tibia, Tremors, significant tremors; Brace wearing, considering orthopedic surgery, xrays, cts; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Having low back pain for years, getting worse recently and pain moves to legs on both sides;Has numbness/tingling from neck down to both hands ;And numbness/tingling moves from back to both legs; There has been treatment or conservative therapy.; Pain in neck is constant and gets tingling ;pain moves to legs on both sides;Has numbness/tingling from neck down to both hands ;And numbness/tingling moves from back to both legs; On GBP 300 mg TID;takeTylenol 500 mg every 8 hrs as needed or ibuprofen 600 mg every 12 hours as needed( donot take more than 3 days a week or more than 15 days a month);-avoid pushing/lifting heavy weights;-Avoid quick head/neck turning activities whe; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for trauma or injury.; 10-20-2021; There has been treatment or conservative therapy.; Migraine, Redness and swelling in the eye. Distorted vision. Chest Pain.; PT and Medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Michael Hale is a 63 y.o. male with PMHx of DM , HTN ,CABAG, ESRD on dialysis since last year presented to the clinic for pretransplant surgical clearance.Patient was seen in the Neurology clinic here at UAMS in 2018 for the concern of abnormal MRI brain ; It is not known if there has been any treatment or conservative therapy.; Michael Hale is a 63 y.o. male with PMHx of DM , HTN ,CABAG, ESRD on dialysis since last year presented to the clinic for pretransplant surgical clearance.Patient was seen in the Neurology clinic here at UAMS in 2018 for the concern of abnormal MRI brain ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Given patient's continued decline and physical exam - imaging is needed to further evaluate and treat; Patient diagnosed with spastic hemiparesis 15 years ago, symptoms began to be much worse. Patient is currently in a wheelchair, can ambulate with walker/can with assistance. Patients symptoms continue to worsen, provider would like imaging to evaluate f; There has not been any treatment or conservative therapy.; Lower extremity weakness, decreased sensation, diminished reflexes, abnormal gait and stance; bilateral lower extremities.; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; It is not known if the patient has new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; WEAKNESS IN BUE AND BLE	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.;	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; Patient is a delightful 43-year-old right-handed woman presents to clinic today with issues that started about a year ago. She recalls that she developed intense burning dysesthetic sensation in left side of her face and scalp. There was concern that sh	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Surgery is scheduled within the next 4 weeks.; Yes, the last Lumbar spine MRI was performed within the past two weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Suspected Tumor with or without Metastasis; There is evidence of tumor or metastasis on a bone scan or x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for a neurological disorder.; tremor and maybe some ataxia; loss of full control of bodily movements; There has been treatment or conservative therapy.; 2/23/2021 patient was reported to have a severe injury, close fracture of shaft of left tibia, Tremors, significant tremors; Brace wearing, considering orthopedic surgery, xrays, cts; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; 11/10/2021; There has been treatment or conservative therapy.; lower back pain . motor weakness; physical therapy and at home exercises; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	WILL SEND CLINICALS; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; WILL SEND CLINICALS; It is not known if there has been any treatment or conservative therapy.; WILL SEND CLINICALS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	New MS flareup suspected; This study is being ordered for a neurological disorder.; 2018 - date of onset; There has been treatment or conservative therapy.; pain and burning sensation in full left leg, increased weakness in left leg. Ocrevus infusions - first dose 11/30/2021; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	no info given; This study is being ordered for trauma or injury.; 11/16/2021; There has been treatment or conservative therapy.; low back pain, joint pain; physical therapy, medication and home exercise; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Focal extremity weakness	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	6 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	2 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	11 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	3 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for a neurological disorder.; tremor and maybe some ataxia; loss of full control of bodily movements; There has been treatment or conservative therapy.; 2/23/2021 patient was reported to have a severe injury, close fracture of shaft of left tibia, Tremors, significant tremors; Brace wearing, considering orthopedic surgery, xrays, cts; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Having low back pain for years, getting worse recently and pain moves to legs on both sides;Has numbness/tingling from neck down to both hands ;And numbness/tingling moves from back to both legs; There has been treatment or conservative therapy.; Pain in neck is constant and gets tingling ;pain moves to legs on both sides;Has numbness/tingling from neck down to both hands ;And numbness/tingling moves from back to both legs; On GBP 300 mg TID;takeTylenol 500 mg every 8 hrs as needed or ibuprofen 600 mg every 12 hours as needed( donot take more than 3 days a week or more than 15 days a month);-avoid pushing/lifting heavy weights;-Avoid quick head/neck turning activities whe; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; 11/10/2021; There has been treatment or conservative therapy.; lower back pain . motor weakness; physical therapy and at home exercises; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for tail bone pain or injury.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; It is not known if the physician has directed conservative treatment for the past 4 weeks.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	no info given; This study is being ordered for trauma or injury.; 11/16/2021; There has been treatment or conservative therapy.; low back pain , joint pain; physical therapy, medication and home exercise; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; It is not known if the urinalysis was positive for bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	75557	Cardiac magnetic resonance imaging for morphology and function without contrast material;	Radiology Services Denied Not Medically Necessary	This is a request for a heart or cardiac MRI	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Neurology	Disapproval	93307	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of an abnormal heart rhythm.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Nuclear Medicine	Disapproval	73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is taking antibiotics.; Non Joint is being requested.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	70450	Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	71250 Computed tomography, thorax; without contrast material	1/3/2022; There has been treatment or conservative therapy.; fatigue and occasional abdominal and bone pain; Neoadjuvant Carboplatin and Taxol; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	71250 Computed tomography, thorax; without contrast material	Ovarian cancer, recurrence known or suspected ;ovarian cancer on chemo; evaluate for response to treatment; There has been treatment or conservative therapy.; Ovarian cancer, recurrence; chemo; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	71250 Computed tomography, thorax; without contrast material	Unknown; There has been treatment or conservative therapy.; Unknown; n/a; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72192 Computed tomography, pelvis; without contrast material	IUD is imbedded in endometrium; There is not a known tumor.; This study is being ordered as pre-operative evaluation.; "The ordering physician is an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; There is NO known pelvic infection.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT; The surgery being considered is NOT a hip replacement surgery.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered because of a suspicious mass/ tumor.; "The patient has had a pelvic ultrasound, barium, CT, or MR study."; This is a request for a Pelvis CT.; There are documented physical findings (painless hematuria, etc.) consistent with an abdominal mass or tumor.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI.; The study is being ordered for endometriosis.; A diagnosis of endometriosis has NOT been established.; The study is being ordered for something other than follow up treatment or pre surgical evaluation.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	bicornuate uterus; This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	mass is at the posterior culdesac; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for Evaluation of the pelvis prior to surgery or laparoscopy.; It is not known if surgery is planned for within 30 days.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in the uterus.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	2 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 02/15/2022; There has been treatment or conservative therapy.; acute left pelvic pain; seen urologist r/o kidney stone ct of adm and pel; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology Unknown; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)		1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	1/3/2022; There has been treatment or conservative therapy.; fatigue and occasional abdominal and bone pain; Neoadjuvant Carboplatin and Taxol; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Ovarian cancer, recurrence known or suspected ;ovarian cancer on chemo; evaluate for response to treatment; There has been treatment or conservative therapy.; Ovarian cancer, recurrence; chemo; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if this study is being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is known tumor.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; It is not known if the study is requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was abnormal.; The ultrasound showed something other than Gall Stones, Kidney/Renal cyst, Aneurysm or a Pelvis Mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has been completed.; The results of the contrast/barium x-ray were normal.; It is unknown if the patient have an endoscopy.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; It is unknown if a contrast/barium x-ray has been completed.; The patient did not have an endoscopy.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Unknown; There has been treatment or conservative therapy.; Unknown; n/a; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 02/15/2022; There has been treatment or conservative therapy.; acute left pelvic pain; seen urologist r/o kidney stone ct of adm and pel; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	74712 Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single or first gestation	This a request for a Fetal MRI.; An ultrasound of the mother been completed.; Congenital or vascular anomalies of the brain or skull has been identified or remains uncertain after an ultrasound.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Enter answer here - or Type In Unknown If No Info Given; Very subtle mammographic and ultrasonographic findings suggesting;architectural distortion in the 12:00 position 3.5 cm from the right nipple.; This is a request for Breast MRI.; This study is being ordered for something other than known breast cancer, known breast lesions, screening for known family history, screening following genetic testing or a suspected implant rupture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	other family members diagnosed, sister diagnosed at 42, paternal grandmother diagnosed at age 30, calculated life time risk of 21.7%; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Patient has a Lifetime risk of 20% for breast cancer, Mother diagnosed with breast cancer at 41 years old.; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Patient is 33 year old who presents with chronic skin infections, discharge from nipples. Pt underwent excisional breast biopsies at age 15, then bilateral breast reduction in 2019. Current Left US Biopsy revealed Fibroepithelial Neoplasm, this MRI of bil; This is a request for Breast MRI.; This study is being ordered for something other than known breast cancer, known breast lesions, screening for known family history, screening following genetic testing or a suspected implant rupture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Patient is considered high risk at 24%, has two paternal aunts and paternal grandmother with breast cancer; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		Tyrer-cuzick life time risk 23.1; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	78813 Positron emission tomography (PET) imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; This study is being ordered for symptoms of a heart problem	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Mass.; This is for the initial evaluation of a cardiac mass.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; abdominal pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have an amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	OB/Gynecology	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; abdominal pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		There are 3 exams are being ordered.; The ordering MDs specialty is Oncology	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		The ordering MDs specialty is Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Follow up treatment of Cancer, Metastatic disease, Malignancy	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		The ordering MDs specialty is Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		The ordering MDs specialty is Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		There are 3 exams are being ordered.; The ordering MDs specialty is Oncology	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71250 Computed tomography, thorax; without contrast material		They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)		Screening for Lung Cancer ;lung cancer screening; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is 49 years old or younger.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; Patients who are NOT between the ages of 50 and 80 years of age do not meet the criteria for lung cancer screening.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing		This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)		This study is being ordered for a known tumor.; The ordering physician is an oncologist, surgeon, pulmonologist, or cardiologist.; The patient is presenting new symptoms.; This study is being ordered for follow-up.; The patient is not undergoing active treatment for cancer.; This is a request for a chest MRI.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material		Mid-back pain ;Bone neoplasm suspected, T-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral cavity. new c/o pain/numbness in hips/legs, bila;Bone neoplasm suspected, L/S-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral. new c/o pain; Mid-back pain ;Bone neoplasm suspected, T-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral cavity. new c/o pain/numbness in hips/legs, bila;Bone neoplasm suspected, L/S-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral. new c/o pain; It is not known if there has been any treatment or conservative therapy.; Bone neoplasm suspected, L/S-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral. new c/o pain/numbness in hips/legs, bila;Mid-back pain ;Bone neoplasm suspected, T-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral cavity. new c/o pain; This study is being ordered for Other	1 2022 2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Mid-back pain ;Bone neoplasm suspected, T-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral cavity. new c/o pain/numbness in hips/legs, bila;Bone neoplasm suspected, L/S-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral. new c/o pain; Mid-back pain ;Bone neoplasm suspected, T-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral cavity. new c/o pain/numbness in hips/legs, bila;Bone neoplasm suspected, L/S-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral. new c/o pain; It is not known if there has been any treatment or conservative therapy.; Bone neoplasm suspected, L/S-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral. new c/o pain/numbness in hips/legs, bila;Mid-back pain ;Bone neoplasm suspected, T-spine, initial exam ;SCC of skin/Basal cell carcinoma/oral cavity. new c/o pain; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Follow up treatment of Cancer, Metastatic disease, Malignancy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was abnormal.; The ultrasound showed something other than Gall Stones, Kidney/Renal cyst, Anearysm or a Pelvis Mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for organ enlargement.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for an other solid tumor.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lung Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is not being ordered for Cervical CA, Brain Cancer/Tumor or Mass, Thyroid CA or other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Oncology	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is NOT a Medicare member.; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is a history of serious head or skull, trauma or injury.ostct"; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is not suspicion of neoplasm, or metastasis.ostct"; This is not a preoperative or recent postoperative evaluation.; "There is not suspicion of acoustic neuroma, pituitary or other tumor. ostct"; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is suspicion of neoplasm, or metastasis.ostct"; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is suspicion of neoplasm, tumor or metastasis.fct"; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)		; This study is being ordered for Inflammatory/ Infectious Disease.; 3 YEARS; It is not known if there has been any treatment or conservative therapy.; OPTIC NEURITIS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)		; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)		diplopia, L 6th nerve palsy; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown No Info Given; It is not known if there has been any treatment or conservative therapy.; diplopia, L 6th nerve palsy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Inflammatory/ Infectious Disease.; 3/10/22; There has been treatment or conservative therapy.; HEADACHE; PT, HEP, ORAL STERIOD, PAIN MEDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/13/2022; There has not been any treatment or conservative therapy.; EYES SHAKING; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	He has been treated for Glaucoma however, Ocular Coherence Tomography studies done in the office do not indicate the vision loss of this severity would be caused by glaucoma.; This study is being ordered for Inflammatory/ Infectious Disease.; 03/11/2022; There has been treatment or conservative therapy.; Vision loss, 3 mm Proptosis of right eye with history of sub-clinical hyperthyroidism, Relative Afferent Pupillary Defect; Time and treatment of intra ocular pressures.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	It is unknown if there is a suspicion of an infection or abscess.; This examination is being requested to evaluate lymphadenopathy or mass.; This is a request for an Orbit MRI; It is unknown if there is a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Minimal Optic disc edema OU, mild grade 1 vs pseudopapilledema ou. Takes tretinoin and has nexplanon implant. Stop taking tretinoin and remove nexplanon; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 02/09/2022; There has been treatment or conservative therapy.; Optic disc edema; Pt has had CT head done 10/2021 with impression; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Patient reports sharp/stabbing pain with eye movement. She is having visual changes or disturbances. Upon evaluation of the patient with a dilated eye exam it was noted that the patient had macular and optic nerve edema in both eyes.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/03/2022; It is not known if there has been any treatment or conservative therapy.; Pain with eye movement.;Decrease in vision.;Visual disturbances.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	There is not a suspicion of an infection or abscess.; This examination is being requested to evaluate lymphadenopathy or mass.; This is a request for an Orbit MRI; There is not a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	There is not a suspicion of an infection or abscess.; This examination is NOT being requested to evaluate lymphadenopathy or mass.; There is not a suspicion of a bone infection (osteomyelitis); There is a suspicion of an orbit or face neoplasm, tumor, or metastasis.; This is a request for an Orbit MRI; There is not a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	This is a request for an Orbit MRI; There is a history of orbit or face trauma or injury.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/22/2020; It is not known if there has been any treatment or conservative therapy.; monocular estropia of right eye, optic atrophy of both eyes, strabismic amblyopia of left eye; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	Fundus exam on 05/05/2022 shows optic nerve edema, pt c/o headaches, tortious vessels, and c/o decrease in vision-; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	Minimal Optic disc edema OU, mild grade 1 vs pseudopapilledema ou. Takes tretinoin and has nexplanon implant. Stop taking tretinoin and remove nexplanon; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 02/09/2022; There has been treatment or conservative therapy.; Optic disc edema; Pt has had CT head done 10/2021 with impression; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for Inflammatory/ Infectious Disease.; 3 YEARS; It is not known if there has been any treatment or conservative therapy.; OPTIC NEURITIS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	CATARACTS, MIGRAINE HEADACHES; This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; It is not known if the headache is presenting with a sudden change in severity, associated with exertion, or a mental status change.; There are not recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.; It is not known if there is a family history (parent, sibling or child of the patient) of AVM (arteriovenous malformation).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	diplopia, L 6th nerve palsy; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown No Info Given; It is not known if there has been any treatment or conservative therapy.; diplopia, L 6th nerve palsy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Inflammatory/ Infectious Disease.; 3/10/22; There has been treatment or conservative therapy.; HEADACHE; PT, HEP, ORAL STERIOD, PAIN MEDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04/13/2022; There has not been any treatment or conservative therapy.; EYES SHAKING; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Fundus exam on 05/05/2022 shows optic nerve edema, pt c/o headaches, tortious vessels, and c/o decrease in vision-; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	He has been treated for Glaucoma however, Ocular Coherence Tomography studies done in the office do not indicate the vision loss of this severity would be caused by glaucoma.; This study is being ordered for Inflammatory/ Infectious Disease.; 03/11/2022; There has been treatment or conservative therapy.; Vision loss, 3 mm Proptosis of right eye with history of sub-clinical hyperthyroidism, Relative Afferent Pupillary Defect; Time and treatment of intra ocular pressures.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	LUL ptosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; Orbital pain and headaches; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Minimal Optic disc edema OU, mild grade 1 vs pseudopapilledema ou. Takes tretinoin and has nexplanon implant. Stop taking tretinoin and remove nexplanon; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 02/09/2022; There has been treatment or conservative therapy.; Optic disc edema; Pt has had CT head done 10/2021 with impression; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient reports sharp/stabbing pain with eye movement. She is having visual changes or disturbances. Upon evaluation of the patient with a dilated eye exam it was noted that the patient had macular and optic nerve edema in both eyes.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/03/2022; It is not known if there has been any treatment or conservative therapy.; Pain with eye movement.;Decrease in vision.;Visual disturbances.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Pt has swelling of optic nerve and indications of visual field defects.; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of infection or inflammation; The patient does not have a fever, stiff neck AND positive laboratory findings (like elevated WBC or abnormal Lumbar puncture fluid examination that indicate inflammatory disease or an infection.; The doctor does not note on exam that the patient has delirium or acute altered mental status.; The patient does not have a Brain CT showing abscess, brain infection, meningitis or encephalitis.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is presenting with a sudden change in severity, associated with exertion, or a mental status change.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as sudden and severe.; There recent neurological deficits on exam such as one sided weakness, speech impairments or vision defects.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is associated with headache, blurred or double vision or a change in sensation noted on exam.; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is associated with headache, blurred or double vision or a change in sensation noted on exam.; The patient is experiencing vertigo	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested due to trauma or injury.; There are new, intermittent symptoms or deficits such as one sided weakness, speech impairments, or vision defects.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of stroke or aneurysm; There are recent neurological symptoms such as one sided weakness, speech impairments, or vision defects.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/22/2020; It is not known if there has been any treatment or conservative therapy.; monocular estropia of right eye, optic atrophy of both eyes, strabismic amblyopia of left eye; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		WILL FAX IN CLINICALS; This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as sudden and severe.; There are NO recent neurological deficits on exam such as one sided weakness, speech impairments or vision defects.; There is a new and sudden onset of a headache less than 1 week not improved by medications.; It is not known if the headache is described as a "thunderclap" or the worst headache of the patient's life.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	LUL ptosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; Orbital pain and headaches; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Ophthalmology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Approval	70336 Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)		This is a request for a temporomandibular joint MRI.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Approval	70486 Computed tomography, maxillofacial area; without contrast material		consultant for now; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Disapproval	70336 Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)	Radiology Services Denied Not Medically Necessary	This is a request for a temporomandibular joint MRI.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	consultant for now; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Oral/Maxillofacial	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	Will fax clinical.; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		2010; There has been treatment or conservative therapy.; vision changes/temporary loss, full feeling in her ears, and pressure at the base of her skull along with neck and low back pain.; Chiropractic care & home PT exercises, NSAIDS; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; Known or suspected TIA (stroke) best describes the reason that I have requested this test.; There are NO documented localizing neurologic findings.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT; This study is being ordered for known tumor.	3	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; Abnormal mass in the chest, chest wall, or lung is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT found in xray; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71250	Computed tomography, thorax; without contrast material	SEE CLINICALS; This study is being ordered for Congenital Anomaly.; SEE CLINICALS; There has been treatment or conservative therapy.; SEE CLINICALS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71250	Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72125	Computed tomography, cervical spine; without contrast material	Concern of Ossification of the Posterior Longitudinal Ligament.;causes severe spinal canal stenosis however there is questionable cord signal changes; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to pre-operative evaluation.; There is no known condition of tumor, infection, or neurological deficits.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72125	Computed tomography, cervical spine; without contrast material	Patient had cervical surgery in April 2022. Pt. reached up and felt severe pain in his left side of his shoulder with radiation down his arm; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72125	Computed tomography, cervical spine; without contrast material	Tammy Pettit is a 56 year old Female who presents to discuss concerns about their Neck Pain, Since their last visit, patient reports feeling Same. ;;She returns for 12 wk postop ACDF C5-7. She reports improvement of pain but still experiencing some pain; This study is being ordered for a neurological disorder.; 2021; There has been treatment or conservative therapy.; limited range of motion, muscle/joint aches, weakness, pain in right arm and muscle spasms,lumbar spine pain that radiates into the BLE.; physical therapy & home exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72125	Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to pre-operative evaluation.; The patient is experiencing or presenting symptoms of abnormal gait.; There is a known condition of neurological deficits.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72125	Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to pre-operative evaluation.; There has been a supervised trial of conservative management for at least 6 weeks.; "The caller indicated that the patient is not experiencing or presenting symptoms of Abnormal Gait, Lower Extremity Weakness, Asymmetric Reflexes, Cauda Equina Syndrome, Bowel or Bladder Disfunction, New Foot Drop, or Radiculopathy."; The patient is experiencing sensory abnormalities such as numbness or tingling.; There is a known condition of neurological deficits.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72125	Computed tomography, cervical spine; without contrast material	This study is to be part of a Myelogram.; This is a request for a Cervical Spine CT	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131	Computed tomography, lumbar spine; without contrast material	; This study is being ordered for a neurological disorder.; 5/2/22; There has been treatment or conservative therapy.; Severe back pain and leg weakness; Surgery for two level fusion 5 months ago; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	; This study is being ordered for a neurological disorder.; Unknown; There has been treatment or conservative therapy.; Severe back pain with radiculopathy, stenosis and nerve compression and postsurgical changes; Patient has had physical therapy, oral and intra muscular steroids, pain management program, spine injections and laminectomy discectomy fusion L5/S1, laminectomy L4-L5; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Known or Suspected Infection or abscess; There is no laboratory or x-ray evidence of osteomyelitis.; There is not laboratory or x-ray evidence of meningitis.; There is not laboratory or x-ray evidence of an infected disc, septic arthritis, or "discitis"; There is laboratory or x-ray evidence of a paraspinal abscess.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; plain CT of the lumbar spine to assure that she has healed as well as referral to pain management for left L4 and L5 transforaminal epidural injections; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is scheduled within the next 4 weeks.; No, the last Lumbar spine MRI was not performed within the past two weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Surgery is scheduled within the next 4 weeks.; Yes, the last Lumbar spine MRI was performed within the past two weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Trauma or recent injury; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; This study is being ordered for Severe Scoliosis; It is unknown if there are neurological deficits on physical exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; This study is being ordered for trauma or injury.; 03/21/22; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; This study is being ordered for trauma or injury.; 05/11/22; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	complaints of chronic neck and low back pain.; Unknown; There has been treatment or conservative therapy.; complaints of chronic neck and low back pain. She reports on August 11, 2021 she was in a MVA in which her car was totaled; PHYSICAL THERAPY; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 03/06/2021; There has been treatment or conservative therapy.; RIGHT SHOULDER PAIN, SWELLING LACKING IN RANGE OF MOTION, NUMBNESS AND TINGLING CROSS SHOULDER AND DOWN TO HAND; HOME THERAPY, NSAIDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	History of Present Illness: Roxanne Faye Pickering is a 50 y.o. year old female patient. ,She presents today with bilateral hip pain. Left is worse than the right. She has pain in the left groin and occasionally on the lateral aspect of the hip. She a; 6 months ago; There has not been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	MRI C SPINE WO, MRI CERVICAL T-SPINE W/OM MRI SPINE LUMBAR WO CONTRAST; This study is being ordered for Congenital Anomaly.; 11/16/2007; There has been treatment or conservative therapy.; ADOLESCENT IDIOPATHIC SCOLIOSIS OF THORACOLUMBAR REGION; FRONTAL AND LATERAL VIEWS OF THE THORACOLUMBAR SPINE WERE PERFORMED WITH THE PATIENT STANDING. LATERAL BEND TILT RADIOGRAPHS WERE PERFORMED. THORACIC DEXTROSCOLIOSIS AND THORACOLUMBAR LEVOSCOLIOSIS SLIGHTLY INCREASED.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	past medical history of graves disease and degenerative disc disease presenting for evaluation of neck and back pain. Patient reports neck pain has been present for 20 years; 2019; There has been treatment or conservative therapy.; Neck and back pain ;Pain is now worst over the right side of her neck and midline low T and high L spine; Medication, Epidural Injections.; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	patient has had several epidural steroids with no relief; tried and failed anti inflammatory meds; nerve pain meds; PT unsuccessful; muscle relaxers do not help; continued pain not responding to tx; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	SEE ATTACHMENTS; This study is being ordered for Congenital Anomaly.; 12/05/2021; There has been treatment or conservative therapy.; Radiculopathy, cervical region ;;Lateral epicondylitis, right elbow; SEE ATTACHMENTS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The patient has a new onset or changing radiculitis / radiculopathy; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury occur within the past 72 hours.; There is new onset radiculitis/radiculopathy.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; It is unknown if the patient has a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had a diagnostic test (such as an EMG/nerve conduction) involving the cervical spine	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; The patient has None of the above	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine; The pain did NOT begin within the past 6 weeks.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is a Medicare member.; The patient has Dermatoma sensory changes on physical examination	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Abnormal Reflexes	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	5	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	9	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Orthopedics; This request is for pre-operative planning; Surgery is planned or scheduled in the next 6 weeks	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Orthopedics; This request is NOT for pre-operative planning; There is a post operative complication	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Surgical Planning; Obtain a MRI prior to surgery to look for any intraspinal pathology. 14 with autism and developmental delay presenting to me with a 53 degree right main thoracic scoliosis curve presumed to be idiopathic in nature. ;X-ray Result: Based; It is not known if there has been any treatment or conservative therapy.; Per PCP clinic notes: Positive for arthralgias and (left shoulder pain) back pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; R sided Hump, 54 degree curve; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Orthopedics; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are abnormal reflexes on exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Twenty year old patient, has not been treated yet. Severe thoracic and lumbar scoliosis. The doctor wants to stabilize to prevent further progression. The studies today will be helpful in treating; 02/11/2022; There has not been any treatment or conservative therapy.; Severe thoracic and lumbar scoliosis, shortness of breath.; This study is being ordered for Multiple Sclerosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Unknown; This study is being ordered for trauma or injury.; 2/18/20; There has been treatment or conservative therapy.; Back pain with paresthesia; PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	; This study is being ordered for Severe Scoliosis ; It is unknown if there are neurological deficits on physical exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	complaints of chronic neck and low back pain.; Unknown; There has been treatment or conservative therapy.; complaints of chronic neck and low back pain. She reports on August 11, 2021 she was in a MVA in which her car was totaled; PHYSICAL THERAPY; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Enter answer here - or Type In Unknown If No Info Given. 6/2/22; There has been treatment or conservative therapy.; ; physical therapy for 6weeks; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	MRI C SPINE WO, MRI CERVICAL T-SPINE W/OM MRI SPINE LUMBAR WO CONTRAST; This study is being ordered for Congenital Anomaly.; 11/16/2007; There has been treatment or conservative therapy.; ADOLESCENT IDIOPATHIC SCOLIOSIS OF THORACOLUMBAR REGION; FRONTAL AND LATERAL VIEWS OF THE THORACOLUMBAR SPINE WERE PERFORMED WITH THE PATIENT STANDING. LATERAL BEND TILT RADIOGRAPHS WERE PERFORMED. THORACIC DEXTRORSCHOLIOSIS AND THORACOLUMBAR LEVOSCHOLIOSIS SLIGHTLY INCREASED.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	patient has had several epidural steroids with no relief; tried and failed anti inflammatory meds; nerve pain meds; PT unsuccessful; muscle relaxers do not help; continued pain not responding to tx; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Pre-Operative Evaluation; Surgery is scheduled within the next 4 weeks.; No, the last Lumbar spine MRI was not performed within the past two weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Orthopedics; This request is for pre-operative planning; Surgery is planned or scheduled in the next 6 weeks	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Surgical Planning; Obtain a MRI prior to surgery to look for any intraspinal pathology. 14 with autism and developmental delay presenting to me with a 53 degree right main thoracic scoliosis curve presumed to be idiopathic in nature. ;X-ray Result: Based; It is not known if there has been any treatment or conservative therapy.; Per PCP clinic notes: Positive for arthralgias and (left shoulder pain) back pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; R sided Hump, S4 degree curve; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Orthopedics; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are abnormal reflexes on exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Twenty year old patient, has not been treated yet. Severe thoracic and lumbar scoliosis. The doctor wants to stabilize to prevent further progression. The studies today will be helpful in treating; 02/11/2022; There has not been any treatment or conservative therapy.; Severe thoracic and lumbar scoliosis, shortness of breath.; This study is being ordered for Multiple Sclerosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Unknown; This study is being ordered for trauma or injury.; 2/18/20; There has been treatment or conservative therapy.; Back pain with paresthesia; PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; This study is being ordered for a neurological disorder.; 5/2/22; There has been treatment or conservative therapy.; Severe back pain and leg weakness; Surgery for two level fusion 5 months ago; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; This study is being ordered for a neurological disorder.; Unknown; There has been treatment or conservative therapy.; Severe back pain with radiculopathy, stenosis and nerve compression and postsurgical changes; Patient has had physical therapy, oral and intra muscular steroids, pain management program, spine injections and laminectomy discectomy fusion L5/S1, laminectomy L4-L5; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; This study is being ordered for Severe Scoliosis ; It is unknown if there are neurological deficits on physical exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Enter answer here - or Type In Unknown If No Info Given. 6/2/22; There has been treatment or conservative therapy.; ; physical therapy for 6weeks; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	MRI C SPINE WO, MRI CERVICAL T-SPINE W/OM MRI SPINE LUMBAR WO CONTRAST; This study is being ordered for Congenital Anomaly.; 11/16/2007; There has been treatment or conservative therapy.; ADOLESCENT IDIOPATHIC SCOLIOSIS OF THORACOLUMBAR REGION; FRONTAL AND LATERAL VIEWS OF THE THORACOLUMBAR SPINE WERE PERFORMED WITH THE PATIENT STANDING. LATERAL BEND TILT RADIOGRAPHS WERE PERFORMED. THORACIC DEXTROSCULIOSIS AND THORACOLUMBAR LEVOSCULIOSIS SLIGHTLY INCREASED.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	past medical history of graves disease and degenerative disc disease presenting for evaluation of neck and back pain. Patient reports neck pain has been present for 20 years; 2019; There has been treatment or conservative therapy.; Neck and back pain ;Pain is now worst over the right side of her neck and midline low T and high L spine; Medication, Epidural Injections.; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	pt has completed physical therapy and other forms of provider treatment without any relief of pain; This study is being ordered for trauma or injury.; January 24,2019; There has been treatment or conservative therapy.; pain in right knee and low back pain; ice, heat, rest and bracing also physical therapy, diclofenac gel, Neurontin, and Mobic; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	suspected cauda equina syndrome; This study is being ordered for a neurological disorder.; 10/20/2021; There has been treatment or conservative therapy.; radiculopathy; weakness; bowel incontinence;; medications; HEP; PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; Something other than listed has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Follow-up to surgery or fracture within the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 47 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 26 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Unilateral focal muscle wasting	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via BBI.; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via BBI.; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via BBI.; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Dermatomal sensory changes on physical examination; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Physical exam findings consistent with myelopathy; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; This case was created via RadMD.; Agreed; The ordering MDs specialty is Orthopedics; Continued; Imaging is being requested for low back pain.; The pain started Greater than 3 months but less than 6 months ago; Acute gait abnormality is documented; The documented finding is new or worsening; There are documented neurological exam findings/deficits	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Orthopedics; This request is for pre-operative planning; Surgery is planned or scheduled in the next 6 weeks	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is Orthopedics; This request is NOT for pre-operative planning; There is a post operative complication	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Surgical Planning; Obtain a MRI prior to surgery to look for any intraspinal pathology. 14 with autism and developmental delay presenting to me with a 53 degree right main thoracic scoliosis curve presumed to be idiopathic in nature. ;X-ray Result: Based; It is not known if there has been any treatment or conservative therapy.; Per PCP clinic notes: Positive for arthralgias and (left shoulder pain) back pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; It is not known if there has been any treatment or conservative therapy.; R sided Hump, 54 degree curve; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for Trauma / Injury; The ordering MDs specialty is Orthopedics; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are abnormal reflexes on exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Twenty year old patient, has not been treated yet. Severe thoracic and lumbar scoliosis. The doctor wants to stabilize to prevent further progression. The studies today will be helpful in treating; 02/11/2022; There has not been any treatment or conservative therapy.; Severe thoracic and lumbar scoliosis, shortness of breath.; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Unknown; This study is being ordered for trauma or injury.; 2/18/20; There has been treatment or conservative therapy.; Back pain with paresthesia; PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72192 Computed tomography, pelvis; without contrast material	He has severe end-stage osteoarthritis of the left hip but we will need to get a CT scan before we schedule surgery do delineate the anatomy after his previous hip trauma surgery. ;Further diagnostic information is needed and could best be obtained with ; This study is being ordered as pre-operative evaluation.; "The ordering physician is an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient.;" This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT ; The surgery being considered a hip replacement surgery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered as a follow-up to trauma.; "The ordering physician is a gastroenterologist, urologist, gynecologist, or surgeon or PCP ordering on behalf of a specialist who has seen the patient.;" This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 4 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered as a follow-up to trauma.; There is NO laboratory or physical evidence of a pelvic bleed.; There are no physical or abnormal blood work consistent with peritonitis or pelvic abscess.; There is physical or radiological evidence of a pelvic fracture.; "The ordering physician is not a gastroenterologist, urologist, gynecologist, or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Leg Pain (right; This study is being ordered for a neurological disorder.; sustained a gunshot wound in January of 2021. Since that time he has had a significant amount of pain and loss of function in the right lower extremity. He states that is burning and tingling pain radiating down the leg and into the foot. He has signifi; There has been treatment or conservative therapy.; sustained a gunshot wound in January of 2021. loss of function in the right lower extremity. He states that is burning and tingling pain radiating down the leg and into the foot.; PHYSICAL THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	She is complaining of continued pain in her hips. She has some narrowing in the joint space but no advanced degenerative findings. Concern for possible AVN or other abnormality. I would like to get a MRI to better evaluate this; This is a request for a Pelvis MRI; It is not known if surgery is planned for within 30 days.; The study is being ordered for Evaluation of the pelvis prior to surgery or laparoscopy.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	suspected cauda equina syndrome; This study is being ordered for a neurological disorder.; 10/20/2021; There has been treatment or conservative therapy.; radiculopathy; weakness; bowel incontinence;; medications; HEP; PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for osteomyelitis.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound. ; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	40 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	41 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	7 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is not suspicion of upper extremity bone or joint infection.; The ordering physician is an orthopedist or rheumatologist.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73206 Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the upper extremity.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for trauma or injury.; 05/04/22; There has not been any treatment or conservative therapy.; Mr. Thomas is a 47-year-old male. The patient presents to the office today in regards to his right hand and right knee injuries. He is accompanied by an adult female. He is currently complaining of right hand and right knee pain that began 1.5 months ago ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	3 months status post extended left carpal tunnel release with left flexor tendon tenosynovectomy x9, along with cultures, washout, and biopsy, as well as left dorsal hand mass excision. ;Biopsy shows no tissue with chronic inflammation from the carpal tu; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; February 24, 2022; There has been treatment or conservative therapy.; Swelling, erythema, decreased ROM, 7 soft tissue masses, neuropathy, severe pain.; Steroids, activity modification, braces, injections, physical therapy, surgery. Patient is immunocompromised so she's unable to take NSAIDs.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The patient's impairment rating was measured today. The patient has 0% impairment of the hand, 30% impairment of the wrist, 2% impairment of the elbow. This translates to a total of 31% impairment of the left upper extremity.;These statements are made wi; This study is being ordered for trauma or injury.; 2021; There has been treatment or conservative therapy.; Pain & swelling in wrist & fingers; Physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	Apr-Jun 25 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	Apr-Jun 26 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is an orthopedist.	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is suspicion of upper extremity neoplasm or tumor or metastasis.; There is suspicion of upper extremity bone or soft tissue infection.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is suspicion of upper extremity neoplasm or tumor or metastasis. ; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	; The study is for infection or inflammation.; There are physical exam findings, laboratory results, other imaging including bone scan or ultrasound confirming infection, inflammation and or aseptic necrosis.; It is not known if surgery is planned for in the next 4 weeks.; This is a request for an elbow MRI; The study is not requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	; This study is being ordered for trauma or injury.; 05/11/22; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	; This is a 78 year old female who is right hand dominant and is being seen for a chief complaint of shoulder pain,;involving the right shoulder. This occurred in the context of a trauma . The right shoulder pain constantly occurs. The;right shoulder pa; This study is being ordered for trauma or injury.; 9 days ago; There has not been any treatment or conservative therapy.; : This is a 78 year old female who is right hand dominant and is being seen for a chief complaint of shoulder pain,;involving the right shoulder. This occurred in the context of a trauma . The right shoulder pain constantly occurs. The;right shoulder pa; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Addendum completed by Kristen Wagner, PA-C on 13 May 2022 ;To clarify, patient has had previous Pain with her left ulnocarpal joint. She has had a previous injection of that left ulnocarpal joint. She splints intermittently as needed. She uses oral aspir; The pain is described as chronic; It is not known if the member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	chronic pain and deformity over his left biceps muscle - previous authorization for MRI Humerus unable to be completed due to patient habitus per facility - order changed; The pain is not from a recent injury, old injury, chronic pain or a mass.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Chronic wrist pain, suspect nerve entrapment or mass; plain films nondiagnostic.Symptoms include stiffness. The patient describes symptoms as aching, sharp, and burning . The following make the problem better: rest and bracing. The following make the symp; The study is for a mass, tumor or cancer.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were not abnormal; This request is for a wrist MRI.; The reason for the study is not for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	concerned she may have a rotator cuff injury on top of her cervical radiculopathy. I am going to have her follow-up with a member of the spine team to review her C-spine MRI and discuss further treatment options; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Around Novemer/December 2022 present for roughly 5-6 months; There has been treatment or conservative therapy.; Patient associated neck pain and numbness/tingling that radiates into her hands and fingers. Her pain worsens with increased activity and certain positions; Conservative therapy of medication; diclofenac sodium and naproxen 500 mg tablet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 03/06/2021; There has been treatment or conservative therapy.; RIGHT SHOULDER PAIN, SWELLING LACKING IN RANGE OF MOTION, NUMBNESS AND TINGLING CROSS SHOULDER AND DOWN TO HAND; HOME THERAPY, NSAIDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Fell while playing basketball and caught herself with her right hand. She has had pain with any use of the wrist since. Pt rates her pain as an 8/10.X-RAY: 4 view right wrist shows linear radial lucency into the ulnar aspect of dist radius seen on AP and ; The pain is from a recent injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Injured left wrist arm wrestling on 4/12/22. Possible TFCC injury; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	LEFT WRIST PAIN, XRAYS SHOWED A POSITIVE CORTICAL RING SIGN, SCAPHOLD IS IN FLEXION, AND EARLY CMC JOINT ARTHRITIS. EXAM IS CONSISTENT WITH A POSSIBLE SCAPHOLUNATE LIGAMENT TEAR.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Looking for a soft tissue mass.; The pain is described as chronic; The member has not failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	no info given; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient had suffered injury to right elbow by lifting something very heavy heard a large pop. Has cons iterate amount of bruising and swelling that is obvious for bicept rupture, will need MRI to confirm diagnosis for surgery.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is not requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient had Toradol injection on 4/29/22 for pain. chronic worsening right elbow and upper extremity pain and dysfunction with differential diagnosis includes;;1. Cubital tunnel syndrome;2. Medial epicondylitis;3. Carpal tunnel syndrome;Positive Tinel; The pain is described as chronic; The member has not failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	PATIENT HAS PAIN 10 OUT OF 10 .SHE IS WEARING A BRACE . WRIST WAS SMASHED IN A CAR DOOR; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient has possible hip labral tear and possible RTC of shoulder; This study is being ordered for trauma or injury.; 6 months; There has been treatment or conservative therapy.; Hip: anterior pain, posterior pain, groin pain and limping.; Shoulder: pai, TP,; NSAIDs, ice, rest, at home exercises.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient returns to clinic today for follow-up on his left elbow. Injection performed in December only lasted for couple of days and he has continued to have pain in his left elbow. He has severe pain of the lateral elbow and at times when he is lifting, h; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is not requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient with continued pain in the right ankle, as well as wrist pain on the right with popping. I would like to get an MRI of both joints to evaluate these joints for anatomic problems that could be causing both his pain and his popping.; The pain is from an old injury.; The member has not failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Patient with severe pain at the volar elbow near the biceps insertion at the proximal forearm. He has pain with supination of the forearm and flexion of the elbow. Patient denies any traumatic event that caused the pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Pt had distal biceps repair on 5/11/22. Patient came in for post op appointment and has injured the elbow since repair. Need MRI to see if the repaired biceps has been torn again.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Pt had woken up with swelling. Pt has had blood work and xrays that did not find anything but this is the 2nd OP she has been to for this issue.; The pain is not from a recent injury, old injury, chronic pain or a mass.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	reports pain in the right wrist for 5 months. This was the result of an injury. The date of injury was 5 months ago while using a planting drill. has pain in the PIP of the ring finger and DIP of the small finger. The pain is in the dorsal and radial a; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	see attached; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; six months ago; There has not been any treatment or conservative therapy.; ; This is a 35 year old female who is right hand dominant and is being seen for a chief complaint of shoulder pain, involving the right shoulder and left shoulder. This occurred in the context of a gradual and insidious onset and has;been treated with N; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Surgery is a possibility; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is not requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; The reason for the study is not for evaluation of wrist pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has surgery planned.; This is a request for an elbow MRI; The study is not requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has surgery planned.; This request is for a wrist MRI.; The reason for the study is not for evaluation of wrist pain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Suspected biceps tendon injury; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	suspected common extensor tendon rupture.;xrays normal.;injury one month ago while lifting something and fell on arm.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Symptoms began with a fall. Symptoms include dorsal pain,swelling, and weakness. The patient describes symptoms as moderate and causing difficulty with every day activity.;The following make the problem better: bracing and Tylenol. The following make t; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	synovitis of wrist; The pain is described as chronic; The member has not failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	tear of FCR, injury 05/16/22, significant pain, increased swelling on the volar aspect of left wrist, minimal ecchymosis, decreased range of motion, extension and flexion, xray shows normal appearance of l wrist with soft tissue swelling notes volarly; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; The reason for the study is not for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Tenderness to palpation of the ulnar collateral ligament. Range of motion is decreased when compared to contralateral side. Weakness with resisted elbow extension. Minimally diastatic fracture through the posterior olecranon process.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for follow-up.; The study is not requested to detect residual cancer after a course of treatment has been completed?; The patient is presenting with unresolved or new symptoms; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for staging.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for staging.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were abnormal.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were abnormal.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; There is a suspicion of fracture not adequately determined by x-ray.; It is not known if there is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; There is a suspicion of fracture not adequately determined by x-ray.; Tendon or ligament injury is not suspected.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; There is a suspicion of fracture not adequately determined by x-ray.; Tendon or ligament injury is not suspected.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; There is a suspicion of fracture not adequately determined by x-ray.; Tendon or ligament injury is not suspected.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI.; The study is requested for evaluation of elbow pain.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The patient has right hand numbness and tingling with pain in the wrist. She has pain with gripping, grasping and lifting. She denies any other associated symptoms. Her symptoms are aggravated with use and not relieved with anything. No other associated s; The pain is described as chronic; It is not known if the member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The patient reports pain in the left and right wrist for 1.5 years. This was not the result of an injury. The patient has not had previous surgery on the wrist. The pain is in the palmar and ulnar aspect of the wrist. MRI on the left to evaluate the pi; The pain is described as chronic; The member has not failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The patient's impairment rating was measured today. The patient has 0% impairment of the hand, 30% impairment of the wrist, 2% impairment of the elbow. This translates to a total of 31% impairment of the left upper extremity.; These statements are made w; This study is being ordered for trauma or injury.; 2021; There has been treatment or conservative therapy.; Pain & swelling in wrist & fingers; Physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; It is not known if the study is requested for shoulder pain.; This study is being ordered for something other than recent injury, planned surgery, mass, tumor or cancer, joint infection/inflammation, post operative evaluation, or aseptic necrosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; It is not known if the physician has directed conservative treatment for the past 4 weeks.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy?; The patient has been treated with medication.; It is not known if the patient has completed 4 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	39	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Home exercise program for 7 weeks with less than adequate results. Patient still having symptoms.; The patient received medication other than joint injections(s) or oral analgesics.; Topical cream pennsaid.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; home stretches; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Patient completed physician directed exercises at home.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; please see clinicals; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Pt verbalized understanding of HEP and shoulder precautions; handout of HEP provided to pt by PT; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; She is worked on range of motion strengthening exercises; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has not been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.;	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI; The request is for shoulder pain.; The pain is described as chronic; The physician has not directed conservative treatment for the past 4 weeks.	Apr-Jun 9 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were abnormal.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were not abnormal	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has not had recent plain films, bone scan or ultrasound of the knee.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	13	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	43	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is a Medicare member.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	16	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; There is a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; It is not know if the physician has directed conservative treatment for the past 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; It is not know if the patient has completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	20	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.;	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has not directed conservative treatment for the past 4 weeks.	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has surgery planned.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has surgery planned.; This is NOT a Medicare member.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; The study is for a mass, tumor or cancer.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for follow-up.; The study is not requested to detect residual cancer after a course of treatment has been completed?; The patient is presenting with unresolved or new symptoms	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; The study is for post operative evaluation.; There are physical or plain film findings of delayed or failed healing.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.; This is NOT a Medicare member.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is not a suspicion of tendon, ligament, rotator cuff injury or labral tear.; The member has a recent injury.; There is a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; This study is being ordered for something other than recent injury, planned surgery, mass, tumor or cancer, joint infection/inflammation, post operative evaluation, or aseptic necrosis	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The study is for a mass, tumor or cancer.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for staging.; This request is for a wrist MRI.; The reason for the study is not for evaluation of wrist pain.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The study is for a mass, tumor or cancer.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were abnormal.; This request is for a wrist MRI.; The reason for the study is not for evaluation of wrist pain.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	This is a 38 year old female who is right hand dominant and is being seen for a chief complaint of shoulder pain, involving the left shoulder and has had no medical treatment. The left shoulder pain constantly occurs. The left shoulder; pain is described; This study is being ordered for trauma or injury.; about 3 months ago this individual was holding a barb wire fence over her head with her left arm. The tire on the ATV; that was passing under this grab the wire causing her to& extend her left arm. She fell on her right arm as well. She; notes considerab; There has not been any treatment or conservative therapy.; This is a 38 year old female who is right hand dominant and is being seen for a chief complaint of shoulder pain, involving the left shoulder and has had no medical treatment. The left shoulder pain constantly occurs. The left shoulder; pain is described; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	This is a 53 year old female who is right hand dominant and is being seen for a chief complaint of wrist pain, involving the right wrist joint. This occurs in the context of a gradual and insidious onset. She has had no imaging; studies. She has had no s; The pain is not from a recent injury, old injury, chronic pain or a mass.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Wrist trauma, scaphoid fracture suspected, neg xray left wrist pain; concern for scaphoid fracture; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	PAIN; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; YEARS; There has been treatment or conservative therapy.; ARTHRITIS; ANTI INFLAMMATOIRES AND THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is not a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is suspicion of lower extremity bone or joint infection.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	There is suspicion of a lower extremity neoplasm, tumor or metastasis.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a preoperative or recent postoperative evaluation.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; The patient has not used a cane or crutches for greater than four weeks.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient does not have an abnormal plain film study of the foot other than arthritis.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has been treated with anti-inflammatory medications in conjunction with this complaint.; This is not for pre-operative planning.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; The patient has used a cane or crutches for greater than four weeks.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient does not have an abnormal plain film study of the foot other than arthritis.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient does not have a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 9 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 9 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is not a history of new onset of severe pain in the ankle within the last two weeks.; The patient does not have an abnormal plain film study of the ankle other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; There is not a suspected tarsal coalition.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.;" There is not a history of new onset of severe pain in the ankle within the last two weeks.; The patient does not have an abnormal plain film study of the ankle other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; There is not a suspected tarsal coalition.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is Non-Diagnostic (to be used during surgery, to mold a joint replacement part, or for CT Needle Guidance); This is NOT for CT Needle Guidance (77011, 77012 or 77013); This is for Makoplasty and/or TKA or other non-surgical planning	Apr-Jun 16 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is suspicion of a lower extremity neoplasm, tumor or metastasis.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	To evaluate abscess and fracture healing; This study is being ordered for trauma or injury.; 8/26/2021; There has been treatment or conservative therapy.; Legs Abscess, pain, drainage; Physical Therapy;NSAIDs; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	To evaluate stage and healing of fracture; This study is being ordered for trauma or injury.; 6/27/21; There has been treatment or conservative therapy.; Pain and immobility; Patient has had surgery, physical therapy, and pain relief meds; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73700 Computed tomography, lower extremity; without contrast material	X-ray;;Weightbearing AP/Lateral/Oblique Right Foot and Ankle: Small avulsion fracture anterior navicular and lateral at calcaneal cuboid joint;;IMPRESSION:;Avulsion Fractue Anterior Navicular and calcaneal-cuboid joint.; This study is being ordered for trauma or injury.; 06/20/2022; There has been treatment or conservative therapy.; Unable to bear weight; Splint and crutches; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; several year history of bilateral knee pain with crepitus and popping.; There has been treatment or conservative therapy.; Chief complaint bilateral knee pain history patient 43-year-old female with a several year history of bilateral knee pain;left worse than the right she denies 1 specific injury states that she was a kid her knees with grind and pop this has;been getting; viscosupplementation, steroid injections physical therapy, home exercises, NSAIDS, prescription pain meds, RICE; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for trauma or injury.; 05/04/22; There has not been any treatment or conservative therapy.; Mr. Thomas is a 47-year-old male. The patient presents to the office today in regards to his right hand and right knee injuries. He is accompanied by an adult female. He is currently complaining of right hand and right knee pain that began 1.5 months ago ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Continues to have mechanical knee pain.; This study is being ordered for trauma or injury.; 47-year-old with mild to moderate bilateral knee osteoarthritis. Failed previous Orthovisc and corticosteroid injections on;multiple occasions. Continues to have mechanical knee pain.; There has been treatment or conservative therapy.; Persistent pain/swelling not responding to conservative therapy. X-rays have ruled out fracture or loose body. and Persistent locking;of knee suggesting torn meniscus or loose body; Failed previous Orthovisc and corticosteroid injections on multiple occasions. Continues to have mechanical knee pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Enter answer here - or Type In Unknown If No Info Given. This is a request for a Knee MRI; It is not known if patient had recent plain films of the knee.; It is not known if the ordering physician is an orthopedist.; This study is being ordered for None of the above; There is no symptom of locking,Instability, Swelling,Redness,Limited range of motion or pain.; It is unknown if surgery is planned.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	I reviewed with the patient his clinical exam and imaging findings today. I am concerned that he may have had meniscus tears bilaterally. There was some question about an injury of the meniscus at that point, but it did not meet the criteria for a tear. I; This study is being ordered for trauma or injury.; APPROXIMATELY 8 MONTHS 09/2021; There has been treatment or conservative therapy.; History of Present Illness;;Dallas Phillips is a 41-year-old male. The patient presents to the office today for evaluation of the bilateral knees. He reports that he has been experiencing steady bilateral knee pain for at least 8 months. He began taking ; History of Present Illness;;Dallas Phillips is a 41-year-old male. The patient presents to the office today for evaluation of the bilateral knees. He reports that he has been experiencing steady bilateral knee pain for at least 8 months. He began taking ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Leg Pain (right; This study is being ordered for a neurological disorder.; sustained a gunshot wound in January of 2021. Since that time he has had a significant amount of pain and loss of function in the right lower extremity. He states that is burning and tingling pain radiating down the leg and into the foot. He has signifi; There has been treatment or conservative therapy.; sustained a gunshot wound in January of 2021. loss of function in the right lower extremity. He states that is burning and tingling pain radiating down the leg and into the foot.; PHYSICAL THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	none; This is a request for a Knee MRI.; It is not known if patient had recent plain films of the knee.; It is not known if the ordering physician is an orthopedist.; This study is being ordered for None of the above; There is no symptom of locking,Instability, Swelling,Redness,Limited range of motion or pain.; It is unknown if surgery is planned.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	PATIENT HAS HISTORY OF INFECTION IN JOINT; This is a request for a Knee MRI.; No, the patient did not have a recent ultrasound of the knee.; There are no physical findings (palpable mass) of a suspicious mass or known primary site of cancer.; The patient has not had a recent bone scan.; The plain films were normal.; This study is being ordered for Known or Suspected Joint Infection	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Possible meniscus tear - knee;Possible rotator cuff tear - shoulder; This study is being ordered for trauma or injury.; 2018; There has been treatment or conservative therapy.; Right knee: Alignment is neutral. Range of motion is preserved. There is medial joint line and condyle tenderness to palpation, mild popliteal fossa tenderness. Thessaly's test is positive. There is no appreciable effusion. The knee is stable on ligamento; Medications;Therapy;activity modifications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	POSSIBLE SURGERY; This study is being ordered for trauma or injury.; PT IS UNSURE OF DATE OF INJURY; There has not been any treatment or conservative therapy.; BURNING, SWELLING, SEVERE PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	PREOP PLANNING; This study is being ordered for trauma or injury.; 06/21/2022; There has been treatment or conservative therapy.; PAIN IN BOTH KNEES, PT HAS HAD INJECTION; PHYSICAL THERAPY AND HOME THERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	pt has completed physical therapy and other forms of provider treatment without any relief of pain; This study is being ordered for trauma or injury.; January 24,2019; There has been treatment or conservative therapy.; pain in right knee and low back pain; ice, heat, rest and bracing also physical therapy, diclofenac gel, Neurontin, and Mobic; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	see clinicals; This study is being ordered for trauma or injury.; 05/01/2022; There has not been any treatment or conservative therapy.; She describes the symptoms as sharp. Symptoms improve with rest. Symptoms worsen with activity, stair climbing, deep knee bending, getting up from a chair, weight bearing, running. The knee has not given out or felt unstable.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	She reports that she has RA, so she commonly has joint pain, but she first "noticed" her left knee hurting in April. It is worse with walking or standing, and better with Motrin and rest. She had x-rays in May, and I reviewed the images as well as the r; This is a request for a Knee MRI.; No, the patient did not have a recent ultrasound of the knee.; There are no physical findings (palpable mass) of a suspicious mass or known primary site of cancer.; The patient has not had a recent bone scan.; The plain films were normal.; This study is being ordered for Known or Suspected Joint Infection	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	There is a pulsatile mass.; "There is evidence of tumor or mass from a previous exam, plain film, ultrasound, or previous CT or MRI.;" Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is not planned for in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a known palpated mass.; This study is NOT being ordered for evaluation of Morton's Neuroma.; It is unknown if surgery, fine needle aspirate or a biopsy is planned in the next 30 days.; A biopsy has NOT been completed.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a post op.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a pre op.; Surgery is planned for within 30 days.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for known fracture.; The study is being ordered to evaluate a possible non union fracture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; It is unknown if they had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has not had a recent bone scan.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They did not have 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has not had a recent bone scan.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a protective boot for at least 4 weeks.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has not been treated with crutches, protective bootm walking cast or immobilization for at least 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for acute pain.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; No treatments are underway or completed.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with a protective boot for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for known or suspected septic arthritis or osteomyelitis.; A plain x-ray of the area been done.; The results of the plain film x-ray were abnormal.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for known or suspected septic arthritis or osteomyelitis.; A plain x-ray of the area has NOT been done.; The patient had abnormal lab studies.; A white blood cell count was completed.; The white blood cell count was high.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for neuroma.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; Prior surgery was noted as an indication for knee imaging; The surgery was NOT done in the past 90 days.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; "This study is being ordered prior to a planned or scheduled open surgery (joint replacement, etc.)."; The ordering physician is an orthopedist.; This study is being ordered for Pre-operative Evaluation (including TKA - Total Knee Arthroplasty); Swelling greater than 3 days; A surgery other than Arthroscopic surgery or Total Knee Arthroplasty (TKA) is being planned	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is Orthopedics.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Abnormal Varus or Valgus stress testing was noted on the physical examination; The ordering MDs specialty is Orthopedics.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Effusion with blood (Hemarthrosis) was noted on the physical examination; The ordering MDs specialty is Orthopedics.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is Orthopedics.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee immobilizer; The ordering MDs specialty is Orthopedics.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is Orthopedics.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is Orthopedics.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is Orthopedics.	8	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is Orthopedics.	30	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Lachmann's test or "drawer" sign (abnormal) was noted on the physical examination; The ordering MDs specialty is Orthopedics.	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; No, the patient did not have a recent ultrasound of the knee.; The patient had recent plain films of the knee.; There are physical findings (palpable mass) of a suspicious mass or known primary site of cancer.; The patient has not had a recent bone scan.; The plain films were normal.; This study is being ordered for Suspicious Mass or Suspected Tumor/ Metastasis	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an oncologist or orthopedist.; The patient is presenting new symptoms.; The patient is not undergoing active treatment for cancer.; This study is being ordered for Known Tumor; This study is being ordered for follow-up.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Instability; It is unknown if surgery is planned.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Instability; Surgery is NOT being planned.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Locking; It is unknown if surgery is planned.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Locking; Surgery is being planned.; Arthroscopic surgery	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Locking; Surgery is NOT being planned.	2	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Swelling greater than 3 days; Surgery is NOT being planned.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for None of the above; Instability; It is unknown if surgery is planned.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for None of the above; Instability; Surgery is NOT being planned.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for None of the above; Limited range of motion; Surgery is NOT being planned.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Post-operative Evaluation	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Pre-operative Evaluation (including TKA - Total Knee Arthroplasty); Locking; Arthroscopic surgery	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Pre-operative Evaluation (including TKA - Total Knee Arthroplasty); Swelling greater than 3 days; Arthroscopic surgery	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Suspected meniscus, tendon, or ligament injury	283	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is not an orthopedist.; This study is being ordered for Pre-operative Evaluation (including TKA - Total Knee Arthroplasty); Locking; Arthroscopic surgery	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The ordering physician is not an orthopedist.; This study is being ordered for Suspected meniscus, tendon, or ligament injury; No, there is no known trauma involving the knee.; Locking; Yes, the member experience a painful popping, snapping, or giving away of the knee.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had recent plain films of the knee.; The plain films were normal.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Pain greater than 3 days; It is unknown if surgery is planned.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had recent plain films of the knee.; The plain films were normal.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Pain greater than 3 days; Surgery is NOT being planned.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had recent plain films of the knee.; The plain films were not normal.; The ordering physician is an orthopedist.; This study is being ordered for Non-acute Chronic Pain; Pain greater than 3 days; It is unknown if surgery is planned.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had recent plain films of the knee.; The plain films were not normal.; The ordering physician is an orthopedist.; This study is being ordered for Pre-operative Evaluation (including TKA - Total Knee Arthroplasty); Pain greater than 3 days; Arthroscopic surgery	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had recent plain films of the knee.; The plain films were not normal.; The ordering physician is not an orthopedist.; This study is being ordered for Suspected meniscus, tendon, or ligament injury; Yes, there is a known trauma involving the knee.; Pain greater than 3 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had recent plain films of the knee.; The plain films were not normal.; This study is being ordered for Suspicious Mass or Suspected Tumor/ Metastasis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with a Wheel chair; The ordering MDs specialty is Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with Crutches; The ordering MDs specialty is Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The plain films were not normal.; This study is being ordered for Known or Suspected Joint Infection	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; This study is being ordered for Pre-operative Evaluation (including TKA - Total Knee Arthroplasty); Total Knee Arthroplasty (TKA)	Apr-Jun 9 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The member has a recent injury.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The member has surgery planned.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for a mass, tumor or cancer.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for infection or inflammation.; There are physical exam findings, laboratory results, other imaging including bone scan or ultrasound confirming infection, inflammation and/or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not known if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 17 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is not taking antibiotics.; This is not a study for a fracture which does not show healing (non-union fracture).; This is a pre-operative study for planned surgery.; Non Joint is being requested.; A Total Hip or Knee Arthroplasty is being planned or has already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is a study for a fracture which does not show healing (non-union fracture).; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is a pre-operative study for planned surgery.; Non Joint is being requested.; A Total Hip or Knee Arthroplasty is NOT being planned nor has one already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	To evaluate abscess and fracture healing; This study is being ordered for trauma or injury.; 8/26/2021; There has been treatment or conservative therapy.; Legs Abscess, pain, drainage; Physical Therapy;NSAIDs; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; weeks ago; There has not been any treatment or conservative therapy.; Pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	EXAM;Left Hip;On examination, ~135 degrees of hip flexion with pain.-Internal rotation of 15 degrees with pain.-External rotation of 12 degrees with pain;- The patient has good pulses, good motor strength, and good sensation about their feet and to; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2/16/1997; There has been treatment or conservative therapy.; "Aching, shooting, stabbing, throbbing" bilateral hip pain. Aggravated with exercise, lying down, positional change, standing, and sitting. Pain is most prominent in the groin area.; Activity modification, NSAIDs, pain medication, and steroid injections with no improvement from conservative treatment. Patient also ambulates with a cane due to pain. Therapy exacerbates the bilateral hip pain.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Left and right hip pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; AVN; There has not been any treatment or conservative therapy.; Left and right hip pain , AVN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; It is not known if the member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 33 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has not failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were not abnormal	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; It is not known if there is a suspicion of tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; Tendon or ligament injury is not suspected.; There is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to an old injury.; It is not known if the member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to an old injury.; The member has not failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is not due to a recent injury, old injury, Chronic Hip Pain or a Mass.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is not for hip pain.; The study is for a mass, tumor or cancer.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is not for hip pain.; The study is for Aseptic Necrosis	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is not for hip pain.; The study is for post operative evaluation.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is not for hip pain.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material		This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown if No Info Given; It is not known if there has been any treatment or conservative therapy.; Bilateral hip pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	74150	Computed tomography, abdomen; without contrast material		found in xray; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	MRI w/o left chest to include scapula to evaluate scapula pain; This study is NOT being ordered for a Work-up for Suspicious Mass, Known Tumor, Known or Suspected Inflammatory Disease, etc...; This is a request for a chest MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72125	Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	Patient continues to describe a lot of right periscapular pain as well as pain that radiates up the neck and down the arm.;She's had some type of cervical procedure. I'm a little unsure if this is just replacement versus a new type of fusion/device. At ; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; Call does not know if there is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72128	Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	It is not known if the patient has any neurological deficits.; This is a request for a thoracic spine CT.; There has been a supervised trial of conservative management for at least 6 weeks.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; other medications as listed.; Tylenol; The patient has completed 6 weeks or more of Chiropractic care.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; None of the above; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is scheduled within the next 4 weeks.; No, the last Lumbar spine MRI was not performed within the past two weeks.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72131	Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has not directed conservative treatment for the past 6 weeks.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141	Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; ; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; 2 years ago; There has been treatment or conservative therapy.; RELIMINARY; Visit Note - April 1, 2022; Bodas, Sean; MRN:; MM0000003951; Phone:; (870) 302-9568; DOB:; 06/26/1975; Sex:; Male; PMS ID:; 111295PAT000003970; Jason McConnell (Primary Provider) (Bill Under) Page 1; (870) 424-3400 Work; Regional Orthopaedic H; pt, surgery, in-saids; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; 2/3/22; There has been treatment or conservative therapy.; Neck pain, back pain, weakness and bowel/bladder changes; Chiropractic Care and Acupuncture; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; 4/26/22; There has been treatment or conservative therapy.; Burning, sharp, shooting and stabbing pain in back with radiculopathy. Bowel/Bladder changes and weakness; Physical Therapy, medication and spine injections; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	: This is a 78 year old female who is right hand dominant and is being seen for a chief complaint of shoulder pain, involving the right shoulder. This occurred in the context of a trauma. The right shoulder pain constantly occurs. The; right shoulder pa; This study is being ordered for trauma or injury; 9 days ago; There has not been any treatment or conservative therapy.; : This is a 78 year old female who is right hand dominant and is being seen for a chief complaint of shoulder pain, involving the right shoulder. This occurred in the context of a trauma. The right shoulder pain constantly occurs. The; right shoulder pa; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	2010; There has been treatment or conservative therapy.; vision changes/temporary loss, full feeling in her ears, and pressure at the base of her skull along with neck and low back pain.; Chiropractic care & home PT exercises, NSAIDS; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	concern for myelopathy per surgeon; 2020; There has been treatment or conservative therapy.; mild global upper extremity weakness; PT/chiropractor visits ;TENS unit ;intramuscular steroids; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	concerned she may have a rotator cuff injury on top of her cervical radiculopathy. I am going to have her follow-up with a member of the spine team to review her C-spine MRI and discuss further treatment options; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Around Novemer/December 2022 present for roughly 5-6 months.; There has been treatment or conservative therapy.; Patient associated neck pain and numbness/tingling that radiates into her hands and fingers. Her pain worsens with increased activity and certain positions; Conservative therapy of medication; diclofenac sodium and naproxen 500 mg tablet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given This study is being ordered for Other	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	films of the cervical thoracic and lumbar spine reveals a positive sagittal balance and kyphotic cervical stance. Exaggerated lumbar lordotic curvature, there is a disc bulge of L4-5 with left lateral recess stenosis; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	MRI C SPINE WO, MRI CERVICAL T-SPINE W/OM MRI SPINE LUMBAR WO CONTRAST; This study is being ordered for Congenital Anomaly.; 11/16/2007; There has been treatment or conservative therapy.; ADOLESCENT IDIOPATHIC SCOLIOSIS OF THORACOLUMBAR REGION; FRONTAL AND LATERAL VIEWS OF THE THORACOLUMBAR SPINE WERE PERFORMED WITH THE PATIENT STANDING. LATERAL BEND TILT RADIOGRAPHS WERE PERFORMED. THORACIC DEXTROSCLOSIOSIS AND THORACOLUMBAR LEVOSCLOSIOSIS SLIGHTLY INCREASED.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	N/A; 05/25/2022; There has not been any treatment or conservative therapy.; Cervical radiculopathy / lumbar radiculopathy; This study is being ordered for Other	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	POSSIBLE SURGERY; This study is being ordered for trauma or injury.; PT IS UNSURE OF DATE OF INJURY; There has not been any treatment or conservative therapy.; BURNING, SWELLING, SEVERE PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a 53 year old female who is being seen for a chief complaint of shoulder pain, involving the left shoulder.;This occurred in the context of a gradual and insidious onset and has had no medical treatment. She has had no;previous diagnostic studie; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; This is a 53 year old female who is being seen for a chief complaint of shoulder pain, involving the left shoulder.;This occurred in the context of a gradual and insidious onset and has had no medical treatment. She has had no;previous diagnostic studie; There has not been any treatment or conservative therapy.; This is a 53 year old female who is being seen for a chief complaint of shoulder pain, involving the left shoulder.;This occurred in the context of a gradual and insidious onset and has had no medical treatment. She has had no;previous diagnostic studie; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The patient has a new onset or changing radiculitis / radiculopathy; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; It is unknown if the patient has a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	14	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.; 2 years ago; There has been treatment or conservative therapy.; RELIMINARY; Visit Note - April 1, 2022; Bodas, Sean; MRN:; MM0000003951; Phone:; (870) 302-9568; DOB:; 06/26/1975; Sex:; Male; PMS ID:; 111295PAT000003970; Jason McConnell (Primary Provider) (Bill Under) Page 1; (870) 424-3400 Work; Regional Orthopaedic H; pt, surgery, insaids.; This study is being ordered for Neurological Disorder	13	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	concern for myelopathy per surgeon; 2020; There has been treatment or conservative therapy.; mild global upper extremity weakness; PT/chiropractor visits ;TENS unit ;intramuscular steroids; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	MRI C SPINE WO, MRI CERVICAL T-SPINE W/OM MRI SPINE LUMBAR WO CONTRAST; This study is being ordered for Congenital Anomaly.; 11/16/2007; There has been treatment or conservative therapy.; ADOLESCENT IDIOPATHIC SCOLIOSIS OF THORACOLUMBAR REGION; FRONTAL AND LATERAL VIEWS OF THE THORACOLUMBAR SPINE WERE PERFORMED WITH THE PATIENT STANDING. LATERAL BEND TILT RADIOGRAPHS WERE PERFORMED. THORACIC DEXTRORSCHIOSIS AND THORACOLUMBAR LEVOSCHIOSIS SLIGHTLY INCREASED.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; 2/3/22; There has been treatment or conservative therapy.; Neck pain, back pain, weakness and bowel/bladder changes; Chiropractic Care and Acupuncture; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; 4/26/22; There has been treatment or conservative therapy.; Burning, sharp, shooting and stabbing pain in back with radiculopathy. Bowel/Bladder changes and weakness; Physical Therapy, medication and spine injections; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury; weeks ago; There has not been any treatment or conservative therapy.; Pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	films of the cervical thoracic and lumbar spine reveals a positive sagittal balance and kyphotic cervical stance. Exaggerated lumbar lordotic curvature, there is a disc bulge of L4-5 with left lateral recess stenosis; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	History of Present Illness: Roxanne Faye Pickering is a 50 y.o. year old female patient. ;She presents today with bilateral hip pain. Left is worse than the right. She has pain in the left groin and occasionally on the lateral aspect of the hip. She a; 6 months ago; There has not been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI C SPINE WO, MRI CERVICAL T-SPINE W/OM MRI SPINE LUMBAR WO CONTRAST; This study is being ordered for Congenital Anomaly.; 11/16/2007; There has been treatment or conservative therapy.; ADOLESCENT IDIOPATHIC SCOLIOSIS OF THORACOLUMBAR REGION; FRONTAL AND LATERAL VIEWS OF THE THORACOLUMBAR SPINE WERE PERFORMED WITH THE PATIENT STANDING. LATERAL BEND TILT RADIOGRAPHS WERE PERFORMED. THORACIC DEXTROSCOLIOSIS AND THORACOLUMBAR LEVOSCOLIOSIS SLIGHTLY INCREASED.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	N/A; 05/25/2022; There has not been any treatment or conservative therapy.; Cervical radiculopathy / lumbar radiculopathy; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Tammy Pettit is a 56 year old Female who presents to discuss concerns about their Neck Pain, Since their last visit, patient reports feeling Same. ;;She returns for 12 wk postop ACDF C5-7. She reports improvement of pain but still experiencing some pain; This study is being ordered for a neurological disorder.; 2021; There has been treatment or conservative therapy.; limited range of motion, muscle/joint aches, weakness, pain in right arm and muscle spasms, lumbar spine pain that radiates into the BLE.; physical therapy & home exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 29 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Unilateral focal muscle wasting	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 9 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	X-ray; AP and lateral views of the left hip from CR Imaging Center on 4/14/22 demonstrate minimal left hip osteoarthritis with small osteophytes on the femoral head. ; IMPRESSION: Left side lumbar radiculopathy ; PLAN: Given her duration of sympto; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease. ; There has been treatment or conservative therapy. ; Tamara presents to urgent care for her left leg. She has pain radiating all down her left leg that starts in her medial thigh into her distal anterior thigh and down her calf into her foot. She reports startup pain that eases as she gets going but then wo; She saw her PCP who prescribed a medrol dosepak which did not provide any relief. She has been taking Meloxicam and Gabapentin without relief. She reports she has been running a mild fever. She has taken amoxicillling given to her by a friend which reports; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72191 Computed tomographic angiography, pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This is a request for a pelvis CT angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72192 Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; 05/17/2022; There has been treatment or conservative therapy. ; ; 05/17/2022;; NSAIDS AND CRUTCHES WITH MINIMAL WEIGHT BEARING; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	49-year-old male seen with chief complaint of bilateral hip pain. Treated the patient approximately 5-1/2 years ago with a hip injection under fluoroscopy in his right hip for degenerative joint disease. He states this is not found for some time; however; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for arthritis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for something other than arthritis, slipped femoral capital epiphysis, bilateral hip avascular necrosis, osteomyelitis or tail bone pain or injury.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73200 Computed tomography, upper extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; 05/11/22; There has not been any treatment or conservative therapy. ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	3 months status post extended left carpal tunnel release with left flexor tendon tenosynovectomy x9, along with cultures, washout, and biopsy, as well as left dorsal hand mass excision. .Biopsy shows no tissue with chronic inflammation from the carpal tu; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; February 24, 2022; There has been treatment or conservative therapy.; Swelling, erythema, decreased ROM, 7 soft tissue masses, neuropathy, severe pain.; Steroids, activity modification, braces, injections, physical therapy, surgery. Patient is immunocompromised so she's unable to take NSAIDS.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 4/20/2022; There has not been any treatment or conservative therapy.; pain ro wrist and forearm, limited range of motion, weakness; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	swelling, pain; This study is being ordered for trauma or injury.; 2021; There has been treatment or conservative therapy. ; ; Occupational therapy, surgery, medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; The pain is from a recent injury.; It is not know if surgery or arthrscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; 03/21/22; There has been treatment or conservative therapy. ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 4/20/2022; There has not been any treatment or conservative therapy.; pain ro wrist and forearm, limited range of motion, weakness; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Lateral epicondylitis; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	PATIENT HAS DONE BRACING AND INJECTIONS FOR THE LAST 6 MONTHS . WITH NO PAIN RELIEF; The pain is described as chronic; The member has not failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Possible meniscus tear - knee;Possible rotator cuff tear - shoulder; This study is being ordered for trauma or injury.; 2018; There has been treatment or conservative therapy.; Right knee: Alignment is neutral. Range of motion is preserved. There is medial joint line and condyle tenderness to palpation, mild popliteal fossa tenderness. Thessaly's test is positive. There is no appreciable effusion. The knee is stable on ligamento; Medications;Therapy;activity modifications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	ROM AND STRENGTH ARE DECREASING; This study is being ordered for trauma or injury.; BIL SHOULDER PAIN x 1 YR THAT'S GETTING PROGRESSIVELY WORSE, ROM AND STRENGTH ARE DECREASING; There has not been any treatment or conservative therapy.; Shoulders: Inspection Right: supraspinatus atrophy. Inspection Left: supraspinatus atrophy. Bony Palpation Right: tenderness of the clavicle lateral one-third. Bony Palpation Left: tenderness of the clavicle lateral one-third. Soft Tissue Palpation Right:; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	SEE ATTACHMENTS; This study is being ordered for Congenital Anomaly.; 12/05/2021; There has been treatment or conservative therapy.; Radiculopathy, cervical region ;Lateral epicondylitis, right elbow; SEE ATTACHMENTS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	swelling, pain; This study is being ordered for trauma or injury.; 2021; There has been treatment or conservative therapy.; ; Occupational therapy, surgery, medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The pain is from a recent injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy?; The patient has been treated with medication.; It is not known if the patient has completed 4 weeks or more of Chiropractic care.; It is not known if the physician has directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 25 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; 5-4-2022 instructed her on gentle stretching exercises to work on for her shoulder. She can continue using warm compresses; The patient received medication other than joint injections(s) or oral analgesics.; Medrol Dosepak started on 5-4-2022;oral anti-inflammatories as needed for pain.diclofenac sodium 75mg 2/day	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; home exercises and anti-inflammatories.; prescription for meloxicam; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Physician directed home exercises; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.;	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; She states she takes diclofenac and a muscle relaxer with no relief	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic.; The physician has not directed conservative treatment for the past 4 weeks.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 14 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 14 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Treatment has included rest, ice, nsaid, stretches and exercises; The patient received oral analgesics.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did not include exercise, prescription medication and follow-up office visits.; The patient received medication other than joint injections(s) or oral analgesics.; Ibuprofen anti-inflammatories	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has surgery planned.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; The member has a recent injury.; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a 53 year old female who is being seen for a chief complaint of shoulder pain, involving the left shoulder.;This occurred in the context of a gradual and insidious onset and has had no medical treatment. She has had no;previous diagnostic studie; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; This is a 53 year old female who is being seen for a chief complaint of shoulder pain, involving the left shoulder.;This occurred in the context of a gradual and insidious onset and has had no medical treatment. She has had no;previous diagnostic studie; There has not been any treatment or conservative therapy.; This is a 53 year old female who is being seen for a chief complaint of shoulder pain, involving the left shoulder.;This occurred in the context of a gradual and insidious onset and has had no medical treatment. She has had no;previous diagnostic studie; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; 05/17/2022; There has been treatment or conservative therapy.; ; 05/17/2022;;NSAIDS AND CRUTCHES WITH MINIMAL WEIGHT BEARING; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	76 yo F w/ large soft tissue mass about R hip. Given the size, depth and the fact that she believes it to be enlarging, I would like to order an MRI to evaluate.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is not a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is being planned or has already been performed.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown if No Info Given. This study is being ordered for trauma or injury.; weeks ago; There has not been any treatment or conservative therapy.; Pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	history of Klippel-Trenaunay syndrome and has multiple vascular malformations around her bilateral feet.; This study is being ordered for Congenital Anomaly.; Unknown; It is not known if there has been any treatment or conservative therapy.; bilateral foot vascular malformations history of Klippel-Trenaunay syndrome; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	INFLAMMATION. PAIN; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 10/06/2016; There has been treatment or conservative therapy.; MASS. PAIN; MEDICATION, INJECTIONS, PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for infection.; There are NO physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for a known palpated mass.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.; This study is being ordered for evaluation of Morton's Neuroma.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for a known palpated mass.; This study is NOT being ordered for evaluation of Morton's Neuroma.; Surgery is planned in the next 30 days.; A biopsy has NOT been completed.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for a pre op.; Surgery is not planned for within 30 days.; This study is NOT being ordered for assessment of a known fracture fragment.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for a pre op.; Surgery is planned for within 30 days.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for known fracture.; The study is being ordered to evaluate a possible non union fracture.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They did not have 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has not had a recent bone scan.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a protective boot for at least 4 weeks.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with immobilization for at least 4 weeks.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	2	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with a walking cast for at least 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication or a cast for at least 6 weeks.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for neuroma.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; Injection into the knee in the past 90 days for treatment and continued pain was noted as an indication for knee imaging	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; 'None of the above' were noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is Orthopedics.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is Orthopedics.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Blood or abnormal fluid in the knee joint was noted as an indication for knee imaging	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The ordering physician is an orthopedist.; This study is being ordered for Suspected meniscus, tendon, or ligament injury	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The ordering physician is not an orthopedist.; This study is being ordered for Suspected meniscus, tendon, or ligament injury; No, there is no known trauma involving the knee.; Limited range of motion; Yes, the member experience a painful popping, snapping, or giving away of the knee.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	10	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is a study for a fracture which does not show healing (non-union fracture).; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	76 yo F w/ large soft tissue mass about R hip. Given the size, depth and the fact that she believes it to be enlarging, I would like to order an MRI to evaluate.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	INFLAMMATION. PAIN; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 10/06/2016; There has been treatment or conservative therapy.; MASS. PAIN; MEDICATION, INJECTIONS, PT; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Left and right hip pain; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; AVN; There has not been any treatment or conservative therapy.; Left and right hip pain , AVN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has possible hip labral tear and possible RTC of shoulder; This study is being ordered for trauma or injury.; 6 months; There has been treatment or conservative therapy.; Hip: anterior pain, posterior pain, groin pain and limping. ;Shoulder: pai, TP,; NSAIDs, ice, rest, at home exercises.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	patients exam findings ; tender SIJ;tender LS spine ;tender sciatic notch ;tender groin; This study is being ordered for trauma or injury.; patient has been having pain for 2 years; There has not been any treatment or conservative therapy.; pain to sit and stand patient also complains of groin pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Physician is looking to see if patient has Trochanteric Bursitis of both hips.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; pain; steroid injections, prescription strength anti inflammatory meds; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; It is not known if the member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were abnormal.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is not due to a recent injury, old injury, Chronic Hip Pain or a Mass.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown if No Info Given; It is not known if there has been any treatment or conservative therapy.; Bilateral hip pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	X-ray;AP and lateral views of the left hip from CR Imaging Center on 4/14/22 demonstrate minimal left hip osteoarthritis with small osteophytes on the femoral head. ;;IMPRESSION;Left side lumbar radiculopathy ;;PLAN; Given her duration of sympto; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; Tamara presents to urgent care for her left leg. She has pain radiating all down her left leg that starts in her medial thigh into her distal anterior thigh and down her calf into her foot. She reports startup pain that eases as she gets going but then wo; She saw her PCP who prescribed a medrol dosepak which did not provide any relief. She has been taking Meloxicam and Gabapentin without relief. She reports she has been running a mild fever. She has taken amoxicicillin given to her by a friend which reports; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for pre-operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; Other than listed above best describes my reason for ordering this study.; This is NOT an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is NOT Cardiology or Nephrology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Orthopedics	Disapproval	S8042 MAGNETIC RESONANCE IMAGING LOW-FIELD	Radiology Services Denied Not Medically Necessary	; This is a request for a low field strength MRI	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Osteopath	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Osteopath	Approval	71250 Computed tomography, thorax; without contrast material		SEE CLINICALS; "There IS evidence of a lung, mediastinal or chest mass noted within the last 30 days.;" They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Osteopath	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Elevated liver enzyme level; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Osteopath	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Osteopath	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; For about a month; There has been treatment or conservative therapy.; Chest Pain, shortness of breath.; Ekg was done; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Evaluation of known or suspected brain bleeding (hemorrhage, hematoma, subdural) best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Evaluation of known or suspected subarachnoid hemorrhagebest describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70486 Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; It is unknown if the patient is immune-compromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been 14 or more days since onset AND the patient failed a course of antibiotic treatment; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is immune-compromised.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are unknown.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/2020; There has been treatment or conservative therapy.; 46-year-old Caucasian woman with history of smoking in the past, newly diagnosed dyslipidemia, with history of recent stroke in March 2020, was referred to the neurology clinic for post stroke headache management. Admitted at SVI on 3/18/2020 and was seen; ASA, Amitriptyline, cognitive behavioral therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/2020; There has been treatment or conservative therapy.; 46-year-old Caucasian woman with history of smoking in the past, newly diagnosed dyslipidemia, with history of recent stroke in March 2020, was referred to the neurology clinic for post stroke headache management. Admitted at SVI on 3/18/2020 and was seen; ASA, Amitriptyline, cognitive behavioral therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	history of stroke; There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is an immediate family history of aneurysm.; This is a request for a Brain MRA.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 05/2020; There has been treatment or conservative therapy.; 46-year-old Caucasian woman with history of smoking in the past, newly diagnosed dyslipidemia, with history of recent stroke in March 2020, was referred to the neurology clinic for post stroke headache management. Admitted at SVI on 3/18/2020 and was seen; ASA, Amitriptyline, cognitive behavioral therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Hx of Bilateral Retinitis Pigmentosa and sensorineural hearing loss secondary to Usher Syndrome.; This study is being ordered for Congenital Anomaly.; 10/11/2021; There has been treatment or conservative therapy.; Visual Changes. Flashing of lights in eyes that last 10-12 hrs.; Amitriptyline 10mg daily; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	There are NO neurological deficits on physical exam; This study is being ordered for Trauma / Injury	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has vision changes; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has fatigue or malaise	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is NOT a new/initial evaluation	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of seizures; There has not been a previous Brain MRI completed.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack); The patient has NOT had a Brain MRI in the last 6 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack); The patient has NOT had a Brain MRI in the last 12 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure. 'None of the above' describes the reason for this request.; This study is being requested for an unresolved cough; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	6 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	5-11-22 MRI SHOWED HEPATOSPLENOMEGALY. LIVER FUNDCTIONS REMAIN ELEVAED. LIVER IS ENLARGED ON EXAM ON 5-18-22 AND SHE HAS ABDOMINAL PAIN.; This study is being ordered for Inflammatory/ Infectious Disease.; 5-11-2022; There has not been any treatment or conservative therapy.; LYMPHADENOPATHY AS FOUND ON 5-11-22 MRI ABDOMEN.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	07/15/2021; There has been treatment or conservative therapy.; vaginal bleeding after a procedure in clinic; 3 cycles carboplatin/paclitaxel followed by whole pelvic radiation; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has been completed; Ths Interstitial Lung Disease is suspected; The chest x-ray was abnormal	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	5 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	It is unknown if they had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	recurrent ovarian cancer on chemo; please evaluate disease response; There has been treatment or conservative therapy.; recurrent ovarian cancer on chemo; please evaluate disease response; recurrent ovarian cancer on chemo; please evaluate disease response; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	There is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71250 Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days ; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)		5 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	concerned about a blood clot near her heart which is why they feel this is an urgent request. She is having extreme abdominal pain.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/9/2022; There has not been any treatment or conservative therapy.; Fatigue and dizziness, weight loss tack cardia. nausea and vomiting.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	hemoptysis, SOB, chest pain, COPD; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Suspected Vascular Disease.; There are new signs or symptoms indicative of a dissecting aortic aneurysm.; Yes, this is a request for a Chest CT Angiography.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Last CTA Chest results: 4.1 cm aneurysmal dilatation of ascending thoracic aorta. Need additional imaging to assess for progression; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a Follow-up to a previous angiogram or MR angiogram.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; There are no signs or symptoms indicative of a progressive vascular stenosis.; Yes, this is a request for a Chest CT Angiography.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known or Suspected Congenital Abnormality.; Yes, this is a request for a Chest CT Angiography.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72125 Computed tomography, cervical spine; without contrast material	Abnormality found on cervical xray, radiologist suggested a CT scan for further examination.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to neurological deficits.; The patient is experiencing or presenting symptoms of abnormal gait.; There is a reason why the patient cannot have a Cervical Spine MRI.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72128 Computed tomography, thoracic spine; without contrast material	The patient does have neurological deficits.; This is a request for a thoracic spine CT.; The study is being ordered due to chronic back pain or suspected degenerative disease.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting lower extremity weakness.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is reflex abnormality.; Absent in the right patella and 1+ in the left patella. 1+ and symmetric in achilles.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	;; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	48 y.o. female with cervical stenosis, cervical radiculopathy vs rotator cuff injury, and chronic pain syndrome.; This study is being ordered for trauma or injury.; 05/19/2; There has been treatment or conservative therapy.; back and neck pain, neck stiffness, weakness in left arm, numbness in left arm, headaches; At home exercise program, epidural steroid injections; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	consider BLMBBs vs LESI after reviewing MRI.;; 47 y.O male with a PMHx significant for HTN, DM, morbid obesity s/p gastric sleeve, presents with;chronic pain in the neck, lower back with LLE radicular symptoms in L4 and L5 dermatomes.;; 2000; There has been treatment or conservative therapy.; Lower Back Pain, Lower Back and Left Leg Pain, Neck Pain, Left Hip, Bilateral Knee Pain; home exercises, NSAIDs, activity modification; This study is being ordered for Other	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	evaluate CESI vs CMBB; 2017; There has been treatment or conservative therapy.; neck pain; The treatments tried in the past include: PT (currently doing PT at PROS), patient has done exercises at home;daily for neck and low back at home as directed by previous spine doctor for more than 1 year, epidural steroid;injections, pain medications, b; This study is being ordered for Other	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	failed physical therapy; approx 4 years ago - 2018; There has been treatment or conservative therapy.; neuropathy, cervicogenic headache, DDD Cervical, neck pain, numbness/tingling in hands, imbalance, low back pain, numbness/tingling in lower extremities, legs feel weak, has had falls, headaches, drops things, restless leg syndrome, myoclonic jerking, nor; uses cane for balance, tried medication, examined by infectious disease specialist, failed physical therapy - made pain worse, following with rheumatology; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Patient is in consideration for Medical branch blocks but has not completed them yet.; 01/06/2022; There has been treatment or conservative therapy.; neck and back pain not control by medication.; Patient has tried medication management; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury occur within the past 72 hours.; The patient had an abnormal xray indicating a complex fracture or severe anatomic derangement of the cervical spine; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; see office notes; home stretching exercises; The ordering MDs speciality is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Patient is a 52 year-old male presents for follow-up of chronic pain. Pain is primarily in the low back and bilateral knees. Today, pain is rated 8/10 in severity. At patient's initial appointment he was prescribed Belbuca 150 mcg BID. Patient has not; This study is being ordered for Trauma / Injury; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are NO abnormal reflexes on exam	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Patient's back pain is getting worse. She finished PT 2 weeks ago and has started hurting again. She was in an MVA in 11/20/21 and this is when all of her problems with her back started.; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has not completed 6 weeks of physical therapy?; The patient has been treated with medication.; other medications as listed.; Diclofenac ;subtext therapy; The patient has not completed 6 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 6 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Ice packs applied to back several times a day for up to 20 minutes alternating with heat (hot showers heating pad and warm towel). anti-inflammatories and pain relievers. home range of motion exercises, rest no lifting and light stretching. if no relief r	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	consider BLMBBs vs LESI after reviewing MRI.;; 47 y.O male with a PMHx significant for HTN, DM, morbid obesity s/p gastric sleeve, presents with;chronic pain in the neck, lower back with LLE radicular symptoms in L4 and L5 dermatomes.; 2000; There has been treatment or conservative therapy.; Lower Back Pain, Lower Back and Left Leg Pain, Neck Pain, Left Hip, Bilateral Knee Pain; home exercises, NSAIDs, activity modification; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	evaluate CESI vs CMBB; 2017; There has been treatment or conservative therapy.; neck pain; The treatments tried in the past include: PT (currently doing PT at PROS), patient has done exercises at home;daily for neck and low back at home as directed by previous spine doctor for more than 1 year, epidural steroid;injections, pain medications, b; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Images will determine what type of injections patient can have; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2018; There has been treatment or conservative therapy.; patient presents for evaluation of Chronic Pain and Bilateral Sacroiliac Joint, Lower Back Pain, Lower;Back and Both Legs Pain. She is an established patient.; PT, PT-directed stretches/exercises to do at home daily (has been doing for more than 3 mos), morphine, oxycodone, oxycodone, tizanidine, celecoxib, gabapentin; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Patient is a 52 year-old male presents for follow-up of chronic pain. Pain is primarily in the low back and bilateral knees. Today, pain is rated 8/10 in severity. At patient's initial appointment he was prescribed Belbuca 150 mcg BID. Patient has not; This study is being ordered for Trauma / Injury; There are neurological deficits on physical exam; The patient is NOT demonstrating unilateral muscle wasting/weakness; The patient is NOT presenting with new symptoms of bowel or bladder dysfunction; There are NO abnormal reflexes on exam	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Patient is in consideration for Medical branch blocks but has not completed them yet.;; 01/06/2022; There has been treatment or conservative therapy.; neck and back pain not control by medication.; Patient has tried medication management; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected infection or abscess	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Pre-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 8 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Abnormal Reflexes	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Dermatological sensory changes on physical examination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via BBI.; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Chiropractic care has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Ice and/or heat has been used for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Physical exam findings consistent with myelopathy; This procedure is NOT being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; There has been treatment or conservative therapy.; see office notes; home stretching exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/24/21; There has been treatment or conservative therapy.; low back pain that goes down the right leg; injections; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Bladder diverticulum; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the bladder.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Elevated PSA; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Images will determine what type of injections patient can have; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 2018; There has been treatment or conservative therapy.; patient presents for evaluation of Chronic Pain and Bilateral Sacroiliac Joint, Lower Back Pain, Lower;Back and Both Legs Pain. She is an established patient.; PT, PT-directed stretches/exercises to do at home daily (has been doing for more than 3 mos), morphine, oxycodone, oxycodone, tizanidine, celecoxib, gabapentin; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	MRI of Pelvis the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient.; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for tail bone pain or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for Evaluation of the pelvis prior to surgery or laparoscopy.; Surgery is planned for within 30 days.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is not suspicion of upper extremity bone or joint infection.; The ordering physician is not an orthopedist or rheumatologist.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	because she has already ruled out these things by her PCP.She had rheumatoid factor, ESR, and any concerns for infection and was all ruled out.; This study is being ordered for trauma or injury.; 2 months ago; There has been treatment or conservative therapy.; pain in both index fingers; She had rheumatoid factor, ESR, and any concerns for infection and was all ruled out.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	possible surgical planning; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; July of 2020; There has been treatment or conservative therapy.; cysts and pain; limited rom; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is suspicion of upper extremity bone or soft tissue infection.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	; The study is not requested for any of the standard indications for Knee MRI; This is a request for an elbow MRI; It is not know if the study is requested for evaluation of elbow pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1-31-2022; There has been treatment or conservative therapy.; Lower Back and (R) Shoulder Pain; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	48 y.o. female with cervical stenosis, cervical radiculopathy vs rotator cuff injury, and chronic pain syndrome.; This study is being ordered for trauma or injury.; 05/19/2; There has been treatment or conservative therapy.; back and neck pain, neck stiffness, weakness in left arm, numbness in left arm, headaches; At home exercise program, epidural steroid injections; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	ER f/u of abnormal xray; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is a history (within the last six months) of significant trauma, dislocation, or injury to the hip."; There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is NOT being planned nor has one already been performed.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; The patient had an abnormal plain film study of the ankle other than arthritis.; There is a suspected tarsal coalition.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; The patient had an abnormal plain film study of the ankle other than arthritis.; There is a suspected tarsal coalition.; The patient does not have a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73700 Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is suspicion of lower extremity bone or joint infection.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; It is not known if surgery is planned for in the next 4 weeks.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is not planned for in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a known palpated mass.; This study is NOT being ordered for evaluation of Morton's Neuroma.; It is unknown if surgery, fine needle aspirate or a biopsy is planned in the next 30 days.; A biopsy has NOT been completed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for known fracture.; The study is being ordered to evaluate a possible non union fracture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is not being ordered for foot pain, known dislocation, infection,suspected fracture, known fracture, pre op, post op or a known/palpated mass.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 9 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is taking antibiotics.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; It is not known if the request is for hip pain.; The study is not requested for any of the standard indications for Knee MRI	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	unkown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/24/21; There has been treatment or conservative therapy.; low back pain that goes down the right leg; injections; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for organ enlargement.; The liver is enlarged.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdomen.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	5-11-22 MRI SHOWED HEPATOSPLENOMEGALY. LIVER FUNDCTIONS REMAIN ELEVAED. LIVER IS ENLARGED ON EXAM ON 5-18-22 AND SHE HAS ABDOMINAL PAIN.; This study is being ordered for Inflammatory/ Infectious Disease.; 5-11-2022; There has not been any treatment or conservative therapy.; LYMPHADENOPATHY AS FOUND ON 5-11-22 MRI ABDOMEN.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	07/15/2021; There has been treatment or conservative therapy.; vaginal bleeding after a procedure in clinic; 3 cycles carboplatin/paclitaxel followed by whole pelvic radiation; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	concerned about a blood clot near her heart which is why they feel this is an urgent request. She is having extreme abdominal pain.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/9/2022; There has not been any treatment or conservative therapy.; Fatigue and dizziness, weight loss tack cardia. nausea and vomiting.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	recurrent ovarian cancer on chemo; please evaluate disease response; There has been treatment or conservative therapy.; recurrent ovarian cancer on chemo; please evaluate disease response; recurrent ovarian cancer on chemo; please evaluate disease response; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; It is not known if the patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is vascular disease.; There is known or suspicion of an abdominal aortic aneurysm.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was abnormal.; The ultrasound showed a Kidney/Renal cyst(s); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was abnormal.; The ultrasound showed something other than Gall Stones, Kidney/Renal cyst, Aneurysm or a Pelvis Mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for hematuria.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if the patient has a renal cyst or tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is NO suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	This is a request for a heart or cardiac MRI	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Patient lifetime risk of 19%, Mother diagnosed at 61. Patient complaints of breast pain and clear nipple discharge chronic.; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	She presents today for evaluation of right breast biopsy proven breast cancer. I discussed breast cancer treatment options in detail with patient including surgery, chemotherapy, radiation, and hormone blocking therapy. Ample time was taken to answer all ; This is a request for Breast MRI.; This study is being ordered for something other than known breast cancer, known breast lesions, screening for known family history, screening following genetic testing or a suspected implant rupture.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; There are benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).; No, the patient does not have a known mutation such as BRCA1, BRCA2, PTEN or TP53.; The patient does NOT have a lifetime risk score of greater than 20.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; No, this is not an individual who has known breast cancer in the contralateral (other) breast.; Yes, this is a confirmed breast cancer.; Yes, the results of this MRI (size and shape of tumor) affect the patient's further management.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are benign lesions in the breast associated with an increased cancer risk.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	The patient did NOT have a prior CABG.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The symptoms can be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above; The patient has None of the above physical limitations; The patient had a recent stress imaging study within the last year; The symptoms are NOT new or changing with new EKG changes NOR does the patient have a left bundle branch block; The patient has NOT had a prior stent; The patient does NOT have documented ejection fraction on prior TTE (Transthoracic Echocardiogram) of less than 40%	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Don't know or Other than listed above best describes the reason for ordering this study	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; it is unknown if Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed; Changing symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78608 Brain imaging, positron emission tomography (PET); metabolic evaluation	Memory loss; This is a request for a Metabolic Brain PET scan; This study is being ordered for dementia.; This patient is NOT enrolled in the Imaging Dementia - Evidence for Amyloid Scanning (IDEAS) clinical trial.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lymphoma or Myeloma.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Colo-rectal Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; There has not been any treatment or conservative therapy.; Patient complains of chest pain and heaviness that is substernal and radiated to back and left shoulder. Patient has had Covid-19 and these symptoms have started since having Covid.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; For about a month; There has been treatment or conservative therapy.; Chest Pain, shortness of breath.; Ekg was done; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; This study is being ordered for symptoms of a heart problem	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; New abnormal physical exam findings, signs or symptoms that suggest cardiac pathology or structural heart disease best describes my reason for ordering this study.; This is NOT an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is NOT Cardiology or Nephrology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Shortness of breath is not related to any of the listed indications.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; This study is being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This request is NOT for initial evaluation of a murmur.; This is NOT a request for follow up of a known murmur.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has abnormal heart sounds	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; There are clinical symptoms supporting a suspicion of structural heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 24 months or more since the last echocardiogram.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is fora routine follow up of congenital heart disease.; It has been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is NOT a change in the patient's cardiac symptoms.; It has NOT been at least 24 months since the last echocardiogram was performed.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report		This is a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of atrial fibrillation or flutter to determine the presence or absence of left atrial thrombus or evaluate for radiofrequency ablation procedure.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70336 Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)	Radiology Services Denied Not Medically Necessary	This is a request for a temporomandibular joint MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected inflammatory disease best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for follow-up to trauma.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is not being ordered for trauma, tumor, sinusitis, osteomyelitis, pre operative or a post operative evaluation.; Yes this is a request for a Diagnostic CT 5-11-22 MRI SHOWED HEPATOSPLENOMEGALY. LIVER FUNDCTIONS REMAIN ELEVAED. LIVER IS ENLARGED ON EXAM ON 5-18-22 AND SHE HAS ABDOMINAL PAIN.; This study is being ordered for Inflammatory/ Infectious Disease.; 5-11-2022; There has not been any treatment or conservative therapy.; LYMPHADENOPATHY AS FOUND ON 5-11-22 MRI ABDOMEN.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary		1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is NOT a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	HISTORY OF PRESENT ILLNESS: Dana G Harris is seen in the office today for a follow-up. Primary cardiologist is Dr. Shows .We are following patient for CAD s/p stent LAD 2015. Most recent HC showed diffuse CAD but no obstruction. We also follow her for; This study is being ordered for Vascular Disease.; Bilateral Carotid Stenosis; There has been treatment or conservative therapy.; HISTORY OF PRESENT ILLNESS: Dana G Harris is seen in the office today for a follow-up. Primary cardiologist is Dr. Shows .We are following patient for CAD s/p stent LAD 2015. Most recent HC showed diffuse CAD but no obstruction. We also follow her for; HISTORY OF PRESENT ILLNESS: Dana G Harris is seen in the office today for a follow-up. Primary cardiologist is Dr. Shows .We are following patient for CAD s/p stent LAD 2015. Most recent HC showed diffuse CAD but no obstruction. We also follow her for; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the brain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	HISTORY OF PRESENT ILLNESS: Dana G Harris is seen in the office today for a follow-up. Primary cardiologist is Dr. Shows .We are following patient for CAD s/p stent LAD 2015. Most recent HC showed diffuse CAD but no obstruction. We also follow her for; This study is being ordered for Vascular Disease.; Bilateral Carotid Stenosis; There has been treatment or conservative therapy.; HISTORY OF PRESENT ILLNESS: Dana G Harris is seen in the office today for a follow-up. Primary cardiologist is Dr. Shows .We are following patient for CAD s/p stent LAD 2015. Most recent HC showed diffuse CAD but no obstruction. We also follow her for; HISTORY OF PRESENT ILLNESS: Dana G Harris is seen in the office today for a follow-up. Primary cardiologist is Dr. Shows .We are following patient for CAD s/p stent LAD 2015. Most recent HC showed diffuse CAD but no obstruction. We also follow her for; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	facial changes; There is not a suspicion of an infection or abscess.; This examination is NOT being requested to evaluate lymphadenopathy or mass.; There is not a suspicion of a bone infection (osteomyelitis); There is NOT a suspicion of an orbit or face neoplasm, tumor, or metastasis.; This is a request for an Orbit MRI.; There is not a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Hx of Bilateral Retinitis Pigmentosa and sensorineural hearing loss secondary to Usher Syndrome.; This study is being ordered for Congenital Anomaly.; 10/11/2021; There has been treatment or conservative therapy.; Visual Changes. Flashing of lights in eyes that last 10-12 hrs.; Amitriptyline 10mg daily; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Patient reports that she thinks it is caused by something going on with her neck, causing a cluster headache, causing her blood pressure to go up, causing dizziness.;She reports that she has treated at home with excedrin migraine and this AM her BP was 1; "This is a request for orbit,face, or neck soft tissue MRI.239.8"; The reason for the study is not for trauma, infection,cancer, mass, tumor, pre or post-operative evaluation	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	Patient has had a positive nerve conduction study.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Since 2015; There has been treatment or conservative therapy.; She has pain in her neck, upper back, headaches. She has numbness in both arms and along her right side near ribs.; Patient has seen pain management and had injections in her neck. She has had physical therapy, she has also tried nsaid and is currently on Gabapentin.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Internal Auditory Canal MRI; There is not a suspected Acoustic Neuroma or tumor of the inner or middle ear.; There is not a suspected cholesteatoma of the ear.; The patient has had a recent brain CT or MRI within the last 90 days.; There are neurologic symptoms or deficits such as one-sided weakness, speech impairments, vision defects or sudden onset of severe dizziness.; This is not a pre-operative evaluation for a known tumor of the middle or inner ear.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; It is unknown why this study is being ordered.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; This study is being requested for 'none of the above';; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Chest pain describes the reason for this request.; This study is being requested for suspicion of pulmonary embolism (PE); This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Received fax outside records from arkansas heart hospital keep the beat. Calcium score on CT elevated, need to follow up with cardiology, Seen on CT, nodules of lung and of liver which require further evaluation via CT chest and abdomen per Lisa Harvey.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA, Chest CTA and Pelvis CTA ordered in combination	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Pre-Operative Evaluation; Surgery is not scheduled within the next 4 weeks.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Patient having trouble with bending and turning; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	;; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	CLINICALS ATTACHED; POSSIBLE SPINAL STENOSIS AND SPINAL CORD COMPRESSION; There has been treatment or conservative therapy.; NECK AND UPPER EXTREMITY PAIN;LOW BACK WITH RADIATING SYMPTOMS; ANTI INFLAMMATORIES;HOME EXERCISES; This study is being ordered for Other	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Exacerbation in cervical and lumbar spine pain with radiculitis into upper extremities and lower extremities.; 12-28-2021; There has been treatment or conservative therapy.; aching, stabbing and;throbbing,ache/pain,low back, neck pain.; Physical Therapy, Medication.; This study is being ordered for Other	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	leg numbness; 01/21/2022; There has been treatment or conservative therapy.; chronic back pain, deficits; HEP and meds; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; UNKNOWN; There has been treatment or conservative therapy.; mid and lower back pain. pain as constant with intermittent flare ups; MEDICATIONS, DECREASED ACTIVITY; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; UNKNOWN; There has been treatment or conservative therapy.; Patient describer the pattern of pain as constant with intermittent flare ups.; MEDICATIONS, DECREASE IN PHYSICAL ACTIVITY, MEDIAL BRANCH BLOCKS, EPIDURAL STERIOD INJECTIONS, Lumbar Radiofrequency Ablation Neurotomy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	n/a.; There has been treatment or conservative therapy.; joint pain, bed rest poor quality of life; x rays, medication, pain management; This study is being ordered for Other	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Pain ;Cervical pain;lumber pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has had a positive nerve conduction study.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Since 2015; There has been treatment or conservative therapy.; She has pain in her neck, upper back, headaches. She has numbness in both arms and along her right side near ribs.; Patient has seen pain management and had injections in her neck. She has had physical therapy, she has also tried nsaid and is currently on Gabapentin.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	see attached notes; Unknown; There has been treatment or conservative therapy.; Sacroiliac Joint pain; medication management, exercise, pt; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	There are NO neurological deficits on physical exam; This study is being ordered for Trauma / Injury	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours; The pain began within the past 6 weeks.; The patient does not have a neurological deficit, PT or home exercise, diagnostic test, or abnormal xray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	WILL FAX RECORDS; WILL FAX RECORDS; There has not been any treatment or conservative therapy.; WILL FAX RECORDS; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	CHRONIC ILLNESS, PALM DISEASE; 08/10/2021; There has been treatment or conservative therapy.; CHRONIC PAIN LOWER BACK; PT, MEDICATION HEP; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	leg numbness; 01/21/2022; There has been treatment or conservative therapy.; chronic back pain, deficits; HEP and meds; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; UNKNOWN; There has been treatment or conservative therapy.; mid and lower back pain. pain as constant with intermittent flare ups; MEDICATIONS, DECREASED ACTIVITY; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; UNKNOWN; There has been treatment or conservative therapy.; Patient describer the pattern of pain as constant with intermittent flare ups.; MEDICATIONS, DECREASE IN PHYSICAL ACTIVITY, MEDIAL BRANCH BLOCKS, EPIDURAL STERIOD INJECTIONS, Lumbar Radiofrequency Ablation Neurotomy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	No Info Given. No Info Given It is not known if there has been any treatment or conservative therapy.; No Info Given This study is being ordered for Other PAIN HAS GRADUALLY INCREASED; 12 YEARS AGO; There has not been any treatment or conservative therapy.; PAIN IN BACK AND HEADACHES; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Patient has had a positive nerve conduction study.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Since 2015; There has been treatment or conservative therapy.; She has pain in her neck, upper back, headaches. She has numbness in both arms and along her right side near ribs.; Patient has seen pain management and had injections in her neck. She has had physical therapy, she has also tried nsaid and is currently on Gabapentin.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	PERSISTENT PAIN NOT BEING MANAGED WITH CURRENT MEDICATION REGIMEN. INTENSITY INCREASES WITH PHYSICAL ACTIVITIES; YEARS; There has been treatment or conservative therapy.; PERSISTENT PAIN; PAIN MANAGEMENT; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; It is not known if there is weakness or reflex abnormality.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; ; It is not known if there has been any treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1-31-2022; There has been treatment or conservative therapy.; Lower Back and (R) Shoulder Pain; medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	CHRONIC ILLNESS, PALM DISEASE; 08/10/2021; There has been treatment or conservative therapy.; CHRONIC PAIN LOWER BACK; PT, MEDICATION HEP; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	CLINICALS ATTACHED; POSSIBLE SPINAL STENOSIS AND SPINAL CORD COMPRESSION; There has been treatment or conservative therapy.; NECK AND UPPER EXTREMITY PAIN;LOW BACK WITH RADIATING SYMPTOMS; ANTI INFLAMMATORIES;HOME EXERCISES; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Exacerbation in cervical and lumbar spine pain with radiculitis into upper extremities and lower extremities. 12-28-2021; There has been treatment or conservative therapy.; aching, stabbing and;throbbing,ache/pain,low back, neck pain.; Physical Therapy, Medication.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	failed physical therapy; approx 4 years ago - 2018; There has been treatment or conservative therapy.; neuropathy, cervicogenic headache, DDD Cervical, neck pain, numbness/tingling in hands, imbalance, low back pain, numbness/tingling in lower extremities, legs feel weak, has had falls, headaches, drops things, restless leg syndrome, myoclonic jerking, nor; uses cane for balance, tried medication, examined by infectious disease specialist, failed physical therapy - made pain worse, following with rheumatology; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings in this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; UNKNOWN; There has been treatment or conservative therapy.; mid and lower back pain. pain as constant with intermittent flare ups; MEDICATIONS, DECREASED ACTIVITY; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	MRI is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient; UNKNOWN; There has been treatment or conservative therapy.; Patient describer the pattern of pain as constant with intermittent flare ups.; MEDICATIONS, DECREASE IN PHYSICAL ACTIVITY, MEDIAL BRANCH BLOCKS, EPIDURAL STERIOD INJECTIONS, Lumbar Radiofrequency Ablation Neurotomy; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	n/a; ; There has been treatment or conservative therapy.; joint pain, bed rest poor quality of life; x rays, medication, pain management; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	No Info Given. No Info Given It is not known if there has been any treatment or conservative therapy.; No Info Given This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Pain ;Cervical pain;lumber pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	PAIN HAS GRADUALLY INCREASED; 12 YEARS AGO; There has not been any treatment or conservative therapy.; PAIN IN BACK AND HEADACHES; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Patient's back pain is getting worse. She finished PT 2 weeks ago and has started hurting again. She was in an MVA in 11/20/21 and this is when all of her problems with her back started.; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	PERSISTENT PAIN NOT BEING MANAGED WITH CURRENT MEDICATION REGIMEN. INTENSITY INCREASES WITH PHYSICAL ACTIVITIES; YEARS; There has been treatment or conservative therapy.; PERSISTENT PAIN; PAIN MANAGEMENT; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	see attached notes; Unknown; There has been treatment or conservative therapy.; Sacroiliac Joint pain; medication management, exercise, pt; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Trauma or recent injury	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	18	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Cannot agree/affirm; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	WILL FAX RECORDS; WILL FAX RECORDS; There has not been any treatment or conservative therapy.; WILL FAX RECORDS; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	MRI of Pelvis the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for this patient.; This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	pain;swelling; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	swelling;pain; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	tarolov cyst noted in lower spine on mri; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; OTC Nsaids, unable to attend PT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; It is not known if there is a suspicion of tendon, ligament, rotator cuff injury, or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; It is not known if there is a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is not a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	"There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; This is a request for bilateral foot MRI.; because both feet hurt	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Blood or abnormal fluid in the knee joint was noted as an indication for knee imaging	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; It is unknown if there is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; It is not known if there is a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Pain medicines are not providing any help.; This study is being ordered for trauma or injury; Unknown; There has been treatment or conservative therapy.; pain in both hips while performing ADL's.; Referred to pain management and prescribed pain medicine in the meantime.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Reasoning already listed earlier in referral; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a mass.; The diagnosis of Mass, Tumor, or Cancer has not been established.; The patient has had recent plain films, bone scan or ultrasound of the knee.; The imaging studies were not abnormal	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; It is not known if there is a suspicion of tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; It is not known if there is a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	Received fax outside records from arkansas heart hospital keep the beat. Calcium score on CT elevated, need to follow up with cardiology. Seen on CT, nodules of lung and of liver which require further evaluation via CT chest and abdomen per Lisa Harvey.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of an Abscess of the upper abdominal area.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for bilirubin.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); liver steatosis, fibrosis; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound results are unknown.; A contrast/barium x-ray has NOT been completed.; The patient did not have an endoscopy.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for hematuria.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdominal arteries.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown; There has not been any treatment or conservative therapy.; Patient complains of chest pain and heaviness that is substernal and radiated to back and left shoulder. Patient has had Covid-19 and these symptoms have started since having Covid.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	CAD screening, high CAD risk, not treadmill candidate, hyperlipidemia, hypertension, chest tightness, SOBOE, elevated white blood cell count, claudication, atrial tachycardia, obesity; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient is 63 years old, is a diabetic, has pulmonary hypertension, has hyperlipidemia and chest pain; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The ordering MDs specialty is not Cardiology or Cardiac Surgery; Ambulates using assistive device such as crutches, cane, walker, or wheelchair	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for congestive heart failure.; It is not known if the member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected cardiac septal defect.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was ST wave changes	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of an abnormal heart rhythm.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of cardiac arrhythmias; It is unknown if this study is being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; There are clinical symptoms supporting a suspicion of structural heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Other	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; There has NOT been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is not suspicion of neoplasm, or metastasis.ostct"; This is a preoperative or recent postoperative evaluation.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is not suspicion of neoplasm, or metastasis.ostct"; This is not a preoperative or recent postoperative evaluation.; "There is not suspicion of acoustic neuroma, pituitary or other tumor. ostct"	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is not suspicion of neoplasm, or metastasis.ostct"; This is not a preoperative or recent postoperative evaluation.; "There is suspicion of acoustic neuroma, pituitary or other tumor. ostct"	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"	16	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	"This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is suspicion of neoplasm, tumor or metastasis.fct"; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	PLEASE SEE RECORDS; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; PLEASE SEE RECORDS; There has been treatment or conservative therapy.; PLEASE SEE RECORDS; PLEASE SEE RECORDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for a known or suspected tumor.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for follow-up to trauma.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for post-operative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for pre-operative evaluation.; Yes this is a request for a Diagnostic CT	17	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis; It is unknown if the patient is immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis; It is unknown if the patient is immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is immune-compromised.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been 14 or more days since onset AND the patient failed a course of antibiotic treatment; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been 14 or more days since onset; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	44	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	8	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are unknown.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is not being ordered for trauma, tumor, sinusitis, osteomyelitis, pre operative or a post operative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	Has a hx of laryngeal cancer T1N0M0 s/p XRT that was completed in 8/2007. Has been NED. chronic cough and dysphagia.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	Pt has extreme dysphagia - can't even put a scope in. Suspect a tumor is pushing on the esophagus. She needs this ASAP, STAT; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	RESTAGING; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	6	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; It is not known if there is a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	11	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; It is unknown if a fine needle aspirate was done.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has been examined twice at least 30 days apart.; It is unknown if the lump got smaller.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The study is being ordered as a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The study is being ordered for recent trauma or other injury.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	7	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for suspicion of neoplasm, tumor or metastasis	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for the evaluation of lymphadenopathy or mass	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	There is not a suspicion of an infection or abscess.; This examination is being requested to evaluate lymphadenopathy or mass.; This is a request for a Face MRI.; There is not a history of orbit or face trauma or injury.	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is not presenting with a sudden change in severity, associated with exertion, or a mental status change.; There are not recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.; There is not a family history (parent, sibling or child of the patient) of AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results was not completed.; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested due to trauma or injury.; There are not new, intermittent symptoms or deficits such as one sided weakness, speech impairments, or vision defects.; The trauma or injury to the head occurred more than 1 week ago.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	abnormal CT of head showed Cyst. recommended mri; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results was not completed.; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	patient is presenting with hearing loss that is a symmetric; This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is not presenting with a sudden change in severity, associated with exertion, or a mental status change.; There are not recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.; It is not known if there is a family history (parent, sibling or child of the patient) of AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	please see clinicals; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results was not completed.; The patient is experiencing dizziness.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	PLEASE SEE RECORDS; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; PLEASE SEE RECORDS; There has been treatment or conservative therapy.; PLEASE SEE RECORDS; PLEASE SEE RECORDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is a suspected Acoustic Neuroma or tumor of the inner or middle ear.	20	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is a suspected Acoustic Neuroma or tumor of the inner or middle ear.	21	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is not a suspected Acoustic Neuroma or tumor of the inner or middle ear.; There is not a suspected cholesteatoma of the ear.; The patient has not had a recent brain CT or MRI within the last 90 days.; There are neurologic symptoms or deficits such as one-sided weakness, speech impairments, vision defects or sudden onset of severe dizziness.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is not a suspected Acoustic Neuroma or tumor of the inner or middle ear.; There is not a suspected cholesteatoma of the ear.; The patient has not had a recent brain CT or MRI within the last 90 days.; There are no neurologic symptoms or deficits such as one-sided weakness, speech impairments, vision defects or sudden onset of severe dizziness.; This is not a pre-operative evaluation for a known tumor of the middle or inner ear.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is not presenting with a sudden change in severity, associated with exertion, or a mental status change.; There are recent neurological symptoms or deficits such as one sided weakness, speech impairments, or vision defects.	5	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is presenting with a sudden change in severity, associated with exertion, or a mental status change.	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as sudden and severe.; There recent neurological deficits on exam such as one sided weakness, speech impairments or vision defects.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a congenital abnormality.; The patient has Fluid on the brain (hydrocephalus).	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results completed.; The lab results were abnormal; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The patient did not have a normal audiogram.; The patient is experiencing hearing loss.	7	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; There are recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	trying to rule out a tumor - hearing loss; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; There are not recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.; There is not a new and sudden onset of headache (less than 1 week) not improved by pain medications.; It is not known if the tumor is a pituitary tumor or pituitary adenoma.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Surveillance of a known cancer following treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	71250 Computed tomography, thorax; without contrast material	Has a hx of laryngeal cancer T1N0M0 s/p XRT that was completed in 8/2007. Has been NED. chronic cough and dysphagia.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	71250 Computed tomography, thorax; without contrast material	Pre-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	71250 Computed tomography, thorax; without contrast material	RESTAGING; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	71250 Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; The abnormality found on a previous CT, MRI or Ultrasound was not in the liver, kidney, pancreas or spleen.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Thyroid Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78813 Positron emission tomography (PET) imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lymphoma or Myeloma.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78813 Positron emission tomography (PET) imaging; whole body		cancer staging; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 2 PET Scans have already been performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	Radiology Services Denied Not Medically Necessary	"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is not suspicion of neoplasm, or metastasis.ostct"; This is not a preoperative or recent postoperative evaluation.; "There is not suspicion of acoustic neuroma, pituitary or other tumor. ostct"	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	Allergic rhinitis, unspecified seasonality, unspecified trigger ;chronic sinusitis; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for pre-operative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is immunocompromised.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been 14 or more days since onset AND the patient failed a course of antibiotic treatment; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70486	Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is not being ordered for trauma, tumor, sinusitis, osteomyelitis, pre operative or a post operative evaluation.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	L TVF paralysis, arytenoid blocking some of the glottic airway. Adequate airway, but narrow. Trach discussed in detail; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; hospitalized in 2019 for 6 weeks and had tube in him he states, since then; It is not known if there has been any treatment or conservative therapy.; L TVF paralysis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; It is not known if there is a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; It is not known if the neck mass has been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is NOT a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490	Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for trauma or injury.; Worsening, since mediastenotomy procedure several years ago. Subglottis and upper trachea appear patent. Recommend CT of the neck/chest to evaluate any tracheal narrowing or collapse that is making the noise with breathing.; There has been treatment or conservative therapy.; Husband states she has had noise with breathing for at least 5 years. Reports having difficulty swallowing certain foods and pills for several years. She has a very strong gag reflex. She carries diagnosis of GERD treated with pantoprazole.; She has had noise with breathing for at least 5 years. She has been on Trelegy ellipta inhaler with no notable improvement. Reports having difficulty swallowing certain foods and pills for several years. She has a very strong gag reflex. She carries diagn; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Known or suspected tumor best describes the reason that I have requested this test.; Known brain tumor best describes the patient's tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	04/04/2022 metastatic small cell carcinoma right level 2 lymph node, staging; There has not been any treatment or conservative therapy.; John J Walker is a 62 y.o. male who presents today with a recently diagnosed small cell carcinoma of the right neck. John was last well around 2 months ago when he noticed a lump in the right upper neck. Dr. Ritchey currently organized an ultrasound-gui; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	L TVF paralysis, arytenoid blocking some of the glottic airway. Adequate airway, but narrow. Trach discussed in detail; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; hospitalized in 2019 for 6 weeks and had tube in him he states, since then; It is not known if there has been any treatment or conservative therapy.; L TVF paralysis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Pt has extreme dysphagia - can't even put a scope in. Suspect a tumor is pushing on the esophagus. She needs this ASAP, STAT; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for trauma or injury.; Worsening, since mediastenotomy procedure several years ago. Subglottis and upper trachea appear patent. Recommend CT of the neck/chest to evaluate any tracheal narrowing or collapse that is making the noise with breathing.; There has been treatment or conservative therapy.; Husband states she has had noise with breathing for at least 5 years. Reports having difficulty swallowing certain foods and pills for several years. She has a very strong gag reflex. She carries diagnosis of GERD treated with pantoprazole.; She has had noise with breathing for at least 5 years. She has been on Trelegy ellipta inhaler with no notable improvement. Reports having difficulty swallowing certain foods and pills for several years. She has a very strong gag reflex. She carries diagn; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Otolaryngology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	04/04/2022 metastatic small cell carcinoma right level 2 lymph node, staging; There has not been any treatment or conservative therapy.; John J Walker is a 62 y.o. male who presents today with a recently diagnosed small cell carcinoma of the right neck. John was last well around 2 months ago when he noticed a lump in the right upper neck. Dr. Ritchey currently organized an ultrasound-gui; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Pathology	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has a known left bundle branch block as documented on an EKG and has been interpreted by a Cardiologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6/23/2022; There has been treatment or conservative therapy.; Swelling of neck, neck pain (constantly holding neck, tender to touch); Xray was done; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Von Hippels Disease.;renal cysts.;maternal family history of and genetically confirmed diagnosis of Von Hippels Disease. ;MRI every year since age 8;;Screening for renal cell carcinoma; This study is being ordered for a metastatic disease.; There are 5 or more exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	71250 Computed tomography, thorax; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Postsurgical changes in right frontal lobe, tumor progression abnormality was seen, follow up imaging required each year to manage continued care.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for a neurological disorder.; shortly after birth, noted; There has been treatment or conservative therapy.; abnormal posture;spastic quadriplegic cerebral palsy;retinopathy of prematurity;low bone density; medications, regular medical visits, MRIs, xrays, bone density, wheelchair; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Von Hippels Disease.;renal cysts.;maternal family history of and genetically confirmed diagnosis of Von Hippels Disease. ;MRI every year since age 8;;Screening for renal cell carcinoma; This study is being ordered for a metastatic disease.; There are 5 or more exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Postsurgical changes in right frontal lobe, tumor progression abnormality was seen, follow up imaging required each year to manage continued care.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This study is being ordered for a neurological disorder.; shortly after birth, noted; There has been treatment or conservative therapy.; abnormal posture;spastic quadriplegic cerebral palsy;retinopathy of prematurity;low bone density; medications, regular medical visits, MRIs, xrays, bone density, wheelchair; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Von Hippels Disease,;renal cysts,;maternal family history of and genetically confirmed diagnosis of Von Hippels Disease. ;MRI every year since age 8;;Screening for renal cell carcinoma; This study is being ordered for a metastatic disease.; There are 5 or more exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Postsurgical changes in right frontal lobe, tumor progression abnormality was seen, follow up imaging required each year to manage continued care.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Chiropractic care has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	This study is being ordered for a neurological disorder.; shortly after birth, noted; There has been treatment or conservative therapy.; abnormal posture;spastic quadriplegic cerebral palsy;retinopathy of prematurity;low bone density; medications, regular medical visits, MRIs, xrays, bone density, wheelchair; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Von Hippels Disease,;renal cysts,;maternal family history of and genetically confirmed diagnosis of Von Hippels Disease. ;MRI every year since age 8;;Screening for renal cell carcinoma; This study is being ordered for a metastatic disease.; There are 5 or more exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered as a follow-up to trauma.; "The ordering physician is a gastroenterologist, urologist, gynecologist, or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is an orthopedist.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is suspicion of upper extremity bone or soft tissue infection.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is suspicion of upper extremity neoplasm or tumor or metastasis. The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for staging.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a recent injury.; There is a suspicion of fracture not adequately determined by x-ray.; Tendon or ligament injury not suspected.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; It is not known if the physician has directed conservative treatment for the past 4 weeks.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a preoperative or recent postoperative evaluation.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73700 Computed tomography, lower extremity; without contrast material		This is Non-Diagnostic (to be used during surgery, to mold a joint replacement part, or for CT Needle Guidance); This is NOT for CT Needle Guidance (77011, 77012 or 77013); This is for Makoplasty and/or TKA or other non-surgical planning	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An MRI showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with an Ace bandage; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The member has a recent injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material		This is a request for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; It is not known if the member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		There are 2 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		Von Hippels Disease.;renal cysts.;maternal family history of and genetically confirmed diagnosis of Von Hippels Disease. ;MRI every year since age 8;;Screening for renal cell carcinoma; This study is being ordered for a metastatic disease.; There are 5 or more exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 3 or younger.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is between 4 and 14 years old.; Abnormal physical exam findings, signs or symptoms that suggest cardiac pathology or structural heart disease best describes my reason for ordering this study.; This is an initial evaluation of a patient not seen in this office before.; The ordering provider's specialty is NOT Cardiology or Nephrology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		Nausea and several episodes of vomiting without diarrhea; This is a request for MRCP.; There is no reason why the patient cannot have an ERCP.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been less than 14 days since onset; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for recent trauma or other injury.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; It is unknown if any of these apply to the patient	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for organ enlargement.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pediatrics	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for evaluation related to chemotherapy (initial evaluation or follow-up).	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	2 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is a Medicare member.; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient has bilateral muscle weakness of upper arms and legs. He had been seen at Jonesboro in the past and was diagnosed with small fiber neuropathy. Per patient report weakness and generalize body aches and pain has slowly progressed since.;He also r; This study is being ordered for a neurological disorder.; 7/2021; There has been treatment or conservative therapy.; pain in bilateral upper and lower extremities, muscle weakness. ;Generalized body aches; Medication, PM&R for trigger point injections, EMG nerve conduction studies, arm brace for arm.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Patient with initial onset of postural headache 11 days prior to office visit. (approx. start date - 3/26/22; There has been treatment or conservative therapy.; Patient with previous chronic migraine presented with postural headache - 10/10 pain when upright, 2/10 pain when laying flat; patient had no symptom improvement even with medications. Imaging needed to rule out intracranial hypotension / CSF leak.; patient treated with tylenol, ibuprofen, propranolol, and nortec with no symptom relief.; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have a sudden severe, chronic or recurring or a thunderclap headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; This study is being ordered as a 12 month annual follow up.; This is a routine follow up.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	3/2021; There has been treatment or conservative therapy.; epigastric pain, nausea, vomiting.; chemo, radiation, surgery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	04/22/2022; There has not been any treatment or conservative therapy.; bladder pain, bladder mass; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	5-6-2021; There has not been any treatment or conservative therapy.; right lung infection possible neoplasm. Finished antibiotics and still has nasty cough and worried about a mass on her right lung, SOB, fatigue; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; The Interstitial Lung Disease is known	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71250	Computed tomography, thorax; without contrast material	There is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	6 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a Follow-up to a previous angiogram or MR angiogram.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; There are no signs or symptoms indicative of a progressive vascular stenosis.; Yes, this is a request for a Chest CT Angiography.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Vascular Disease; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	71550	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	This study is being ordered for a known tumor.; The ordering physician is an oncologist, surgeon, pulmonologist, or cardiologist; This study is being ordered for follow-up.; The patient is undergoing active treatment for cancer; This is a request for a chest MRI.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to trauma or acute injury within 72 hours.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Abnormal gait.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72128 Computed tomography, thoracic spine; without contrast material	This is a request for a thoracic spine CT.; The patient has been seen by, or the ordering physician is, a neuro-specialist, orthopedist, or oncologist.; The study is being ordered due to follow-up to surgery or fracture within the last 6 months.; There is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72128 Computed tomography, thoracic spine; without contrast material	This is a request for a thoracic spine CT.; There is evidence of tumor or metastasis on a bone scan or x-ray.; The study is being ordered due to suspected tumor with or without metastasis.; There is a reason why the patient cannot undergo a thoracic spine MRI.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; It is not known if there is weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	;; There has been treatment or conservative therapy.; ; Describe treatment / conservative therapy here - or Type in Unknown If No IPHY THERAPY, STEROIDS, CHIROP, INJECTONS.; This study is being ordered for Other	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Patient has bilateral muscle weakness of upper arms and legs. He had been seen at Jonesboro in the past and was diagnosed with small fiber neuropathy. Per patient report weakness and generalize body aches and pain has slowly progressed since.;He also r; This study is being ordered for a neurological disorder.; 7/2021; There has been treatment or conservative therapy.; pain in bilateral upper and lower extremities, muscle weakness.;Generalized body aches; Medication, PM&R for trigger point injections, EMG nerve conduction studies, arm brace for arm.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Patient with initial onset of postural headache 11 days prior to office visit. (approx. start date - 3/26/22; There has been treatment or conservative therapy.; Patient with previous chronic migraine presented with postural headache - 10/10 pain when upright, 2/10 pain when laying flat; patient had no symptom improvement even with medications. Imaging needed to rule out intracranial hypotension / CSF leak.; patient treated with tylenol, ibuprofen, propranolol, and nurtec with no symptom relief.; This study is being ordered for Other not listed	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	see clinicals; see clinicals; There has been treatment or conservative therapy.; see clinicals; see clinicals; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Abnormal Reflexes	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	1 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; Multiple Sclerosis describes the reason for requesting this procedure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor ; ; There has been treatment or conservative therapy. ; Describe treatment / conservative therapy here - or Type In Unknown If No IPHY THERAPY, STEROIDS, CHIROP, INJECTONS.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	; This study is being ordered for Severe Scoliosis ; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Patient has bilateral muscle weakness of upper arms and legs. He had been seen at Jonesboro in the past and was diagnosed with small fiber neuropathy. Per patient report weakness and generalize body aches and pain has slowly progressed since.;He also r; This study is being ordered for a neurological disorder.; 7/2021; There has been treatment or conservative therapy.; pain in bilateral upper and lower extremities, muscle weakness. .Generalized body aches; Medication, PM&R for trigger point injections, EMG nerve conduction studies, arm brace for arm.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Unknown; Unknown; It is not known if there has been any treatment or conservative therapy.; he patient complains of ache/pain in back. She reports onset of pain gradually over time. The;patient describes her pain as constant. The pain is dull. The pain radiates to the le,ue.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; This study is being ordered for Severe Scoliosis ; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	CONSISTENT PAIN.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6/30/2016; There has been treatment or conservative therapy.; PAIN. RESTLESS LEGS SYNDROME. OSTEOARTHRISIS. DEGENERATION OF LUMBAR INTERVERTEBRAL DISC; PAIN MEDICATION. ACTIVITY MODIFICAITON; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	see clinicals; see clinicals; There has been treatment or conservative therapy.; see clinicals; see clinicals; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	21	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal nerve study (EMG) involving the lumbar spine; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via BBI.; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; The patient has Dermatoma sensory changes on physical examination; This procedure is NOT being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Agree; The patient has New symptoms of bowel or bladder dysfunction; This procedure is NOT being ordered for acute or chronic back pain	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Unknown; Unknown; It is not known if there has been any treatment or conservative therapy.; he patient complains of ache/pain in back. She reports onset of pain gradually over time. The;patient describes her pain as constant. The pain is dull. The pain radiates to the le,ue.; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Disease evaluation; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	We are trying to determine the cause of the pain.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 11/21/2021; There has been treatment or conservative therapy.; Left arm and shoulder pain.; Pt has been to physical therapy for 3 weeks and it has given her no relief.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from a known mass.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for staging.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	unkown\ This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; jan 1 2022.; There has been treatment or conservative therapy.; right shoulder pain weakness on both sides lost of range of motion trouble sleeping; steroid injections at home exercises; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	We are trying to determine the cause of the pain.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 11/21/2021; There has been treatment or conservative therapy.; Left arm and shoulder pain.; Pt has been to physical therapy for 3 weeks and it has given her no relief.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip."; There is not a suspicion of AVN.; The patient had an abnormal plain film study of the hip other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is being ordered by the operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT ; A Total Hip Arthroplasty is NOT being planned nor has one already been performed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being oordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; It is not known if surgery is planned for in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI; Abnormal physical examination of the knee was noted as an indication for knee imaging; 'None of the above' were noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for trauma.; This request is not for follow up to abdominal and/or pelvic trauma ordered by a specialist or PCP on behalf of a specialist who has seen the patient.; There is recent trauma with physical findings or abnormal blood work indicating either peritonitis or abscess.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Vascular Disease; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	3/2021; There has been treatment or conservative therapy.; epigastric pain, nausea, vomiting,; chemo, radiation, surgery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	04/22/2022; There has not been any treatment or conservative therapy.; bladder pain, bladder mass; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	5-6-2021; There has not been any treatment or conservative therapy.; right lung infection possible neoplasm. Finished antibiotics and still has nasty cough and worried about a mass on her right lung, SOB, fatigue; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed within the past 10 months.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has NOT been completed.; The patient did not have an endoscopy.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Disease evaluation; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; This study is NOT being ordered to evaluate an undescended testicle in a male.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done.; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	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	; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &gt;2021; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &gt;; Dizziness, chest pain and shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; episodes of syncope without warning; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	History of stent and cath surgery. patient is diabetic. patient unable to walk on tread mill; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	nuclear stress to evaluate for ischemic etiology of her LV systolic dysfunction (she preferred this over cath); This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/7/2022; There has been treatment or conservative therapy.; LEFT VENTRICULAR SYSTOLIC DYSFUNCTION. AFIB, FLUTTERS; CARIOVERSION, ECHO.;Change metoprolol tartrate (12.5 mg BID?, she was unsure of how she is taking it) to Toprol-XL 50 mg daily for her left ventricular systolic dysfunction and increase her adherence as she forgets to take evening medicines often times; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 1 or less cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); The study is requested for evaluation of the heart prior to non cardiac surgery.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); This case was created via RadMD; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study); This case was created via RadMD; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	To assess left ventricular ejection fraction. Has had a previous heart attack, so need to see if there has been damage.; This study is being ordered for Vascular Disease.; 2016; There has been treatment or conservative therapy.; Hypertension, shortness of breath and CVA. Also has SVT's on EKG.; An ablation and medication.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for an other solid tumor.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lymphoma or Myeloma.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This PET Scan is being requested for None of the above or don't know; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Prostate Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Soft Tissue Sarcoma, Pancreatic or Testicular Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 4 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This study is being requested for Breast Cancer.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was NOT performed on the axillary lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; 01/07/2022; Neuro Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The patient recently suffered either a CVA or TBI; 5/4/2022; The evaluation date is not in the future; Date of onset is within the last 6 months; Three or more visits anticipated; Therapy type is Neuro Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; 03/29/2022; Neuro Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The patient recently suffered either a CVA or TBI; 5/24/2022; The evaluation date is not in the future; Date of onset is within the last 6 months; Three or more visits anticipated; Therapy type is Neuro Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; 04/11/2022; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; Date of onset is within the last 6 months; The patient recently suffered either a CVA or TBI; 04/27/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; 05/05/2022; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; Date of onset is within the last 6 months; The patient recently suffered either a CVA or TBI; 05/23/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; 05/27/2022; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The patient recently suffered either a CVA or TBI; 06/27/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65; Onset was less than 6 months ago	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Mild functional deficits supported by standardized assessments; The member is 0-3 years old; Language: Preschool Language Scale- Fifth Edition (PLS-5);Language: Receptive-Expressive Emergent Language Test, Third Edition (REEL-3);Hearing;Voice and Resonance;Oral Peripheral;Fluency;Articulation; please see Speech Evaluation; 01/04/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	1 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Mild functional deficits supported by standardized assessments; The patient is between 4 and 8 years old; 2/28/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Moderate to severe functional deficits supported by standardized assessments; The member is 0-3 years old; 04/12/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Moderate to severe functional deficits supported by standardized assessments; The member is 0-3 years old; 04/20/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Moderate to severe functional deficits supported by standardized assessments; The patient is between 4 and 8 years old; 3/3/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The primary condition is Cognitive linguistic Impairment; The patient has not recently suffered either a CVA or TBI; 04/29/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The primary condition is Cognitive linguistic Impairment; The patient has not recently suffered either a CVA or TBI; 5/4/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The primary condition is Cognitive linguistic Impairment; The patient has not recently suffered either a CVA or TBI; 06/29/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The primary condition is Dysphagia; The patient has not recently suffered either a CVA or TBI; 03/10/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The primary condition is Dysphagia; The patient has not recently suffered either a CVA or TBI; 03/14/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; 6/6/2022; The evaluation date is not in the future; One visit anticipated; Rehabilitative; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 1/5/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 02/08/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 2/9/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 3/2/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 3/15/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 3/18/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 04/07/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 04/13/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 4/20/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 4/26/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 05/24/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 05/26/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 05/31/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 6/2/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 6/7/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 11/25/2020; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 12/8/21; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has not been any treatment or conservative therapy.; episodes of syncope without warning; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; There are clinical symptoms supporting a suspicion of structural heart disease.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 12 - 23 months or more since the last echocardiogram.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an evaluation of new or changing symptoms of valve disease.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	16	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Congenital Heart Defect.; This is for evaluation of change of clinical status.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; This is for the initial evaluation of heart failure.	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of a recent myocardial infarction (heart attack).	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	7	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The atrial fibrillation and/or atrial flutter is pre-existing.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study. This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via BBI.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; A Transthoracic Echocardiogram has not been completed.; New onset murmur best describes the reason for ordering this study.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The atrial fibrillation and/or atrial flutter is new onset.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed.; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms was more than 6 months ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed.; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	To assess left ventricular ejection fraction. Has had a previous heart attack, so need to see if there has been damage.; This study is being ordered for Vascular Disease.; 2016; There has been treatment or conservative therapy.; Hypertension, shortness of breath and CVA. Also has SVT's on EKG.; An ablation and medication.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of atrial fibrillation or flutter to determine the presence or absence of left atrial thrombus or evaluate for radiofrequency ablation procedure.; The patient is 18 years of age or older.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93350 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;	This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; It is not known if the member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93350 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;	This is a request for a Stress Echocardiogram.; The patient had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The patient is experiencing new or changing cardiac symptoms.; The member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	93350 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;	This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	1/19/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	01/25/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	01/26/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	1/31/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/7/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	02/08/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/10/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; ADL's; 80; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; Other/none of the above; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/11/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/14/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; adl's; 75%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent injury to cause a change in function; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/16/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	02/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; UNKNOWN; 0; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; Other/none of the above; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/18/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/21/22; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/21/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	2/25/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	02/28/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	03/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 01/14/2022; Date of onset is within the last 4 months; The patient requires human assistance and/or assistive device to walk and/or transfer; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; CVA is the selected condition	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	3/2/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	03/03/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022







4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	3/29/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; na; na; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	03/30/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	3/30/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	03/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 03/20/2022; Date of onset is within the last 4 months; The patient requires human assistance and/or assistive device to walk and/or transfer; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; CVA is the selected condition	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	03/31/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; unknown; Unknown; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; Other/none of the above; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/01/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/1/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/04/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; Lumbar AROM; 30%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent injury to cause a change in function; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; na; na; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/05/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022





4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/14/2022; TOTAL KNEE REPLACEMENT; Post-Op; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/14/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/15/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/15/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/15/2022; Left knee arthroscopy; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/2/2022; right total knee arthroplasty; Pre-Op; Neither Pre-Op, Post-Op or Non-Surgical; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Pre-Op; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/18/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/18/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; Mullins Scales;PDMS-2; very low and significant deficit; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The member is under 1 year old.; Physical Therapy was requested; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	2	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 1/7/2022; Date of onset is within the last 4 months; The patient requires human assistance and/or assistive device to walk and/or transfer; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; CVA is the selected condition	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05-19-2022; RIGHT TOTAL KNEE ARTHROPLASTY; Pre-Op; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Pre-Op; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/27/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/27/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	04/28/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4/28/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; na; na; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/02/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/2/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/03/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 8/2/2021; Removal of sarcoma from r thigh in August of 2021.; Post-Op; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/03/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/3/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/18/2022; stomach; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; ADL'S; 50%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/04/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 05/01/2019; Date of onset is more than 4 months ago; The patient requires human assistance and/or assistive device to walk and/or transfer; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; CVA is the selected condition	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/5/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/05/2022; OPEN REDUCTION AND INTERNAL FIXATION OF RIGHT BICONDYLAR TIBIAL PLATEAU FRACTURE; Post-Op; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/16/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/16/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/17/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/17/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/18/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/18/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/19/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 04/23/2022; Date of onset is within the last 4 months; The patient requires human assistance and/or assistive device to walk and/or transfer; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; CVA is the selected condition	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/20/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 02/25/2022; Date of onset is within the last 4 months; The patient requires human assistance and/or assistive device to walk and/or transfer; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; CVA is the selected condition	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer ; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/23/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/23/2022; Knee arthroscopy; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; ADL'S; 65%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; Other/none of the above; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; Low Back Pain Questionnaire; 56% dysfunction; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/24/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/24/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; ADL'S; 50%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent injury to cause a change in function; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	05/25/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/25/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/26/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; SPADI; 104/130; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/27/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Gait, Balance and Falls is the selected condition; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; Gait, Balance and Falls is the selected condition	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/02/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/2/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/3/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/6/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/08/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/8/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Gait, Balance and Falls is the selected condition; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls is the selected condition	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/09/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/9/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	3	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; None of the listed conditions were selected; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/10/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/10/2022; LT. knee arthroscopy; Post-Op; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/10/2022; Right knee arthroscopy; Post-Op; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/10/2022; RT. knee arthroscopy; Post-Op; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; MODIFIED OSWESTRY; 56%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/13/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/13/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1 2022 2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/27/2022; total knee arthroplasty; Pre-Op; Neither Pre-Op, Post-Op or Non-Surgical; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Pre-Op; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/27/2022; total knee arthroplasty; Pre-Op; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Pre-Op; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/14/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 11/08/2022; repair of right calcaneus Fx ORIF; Pre-Op; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Pre-Op; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/15/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/15/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/16/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; Lower Extremity Functional Scale; 83%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent injury to cause a change in function; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 06/02/2022; Date of onset is within the last 4 months; The patient does not require human assistance and/or assistive device to walk and/or transfer; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; CVA is the selected condition	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; Modified Oswestry; CL; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/20/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Gait, Balance and Falls is the selected condition; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Physical therapy was requested; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; Gait, Balance and Falls is the selected condition	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/21/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/21/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; ND; 52%; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Physical Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; Other/none of the above; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	06/22/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	6/22/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	12/8/21; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	12/23/2021; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part for first pass is Knee; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Knee request: ; One visit anticipated; Neither Pre-Op, Post-Op or Non-Surgical; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 04/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; The hip is beigng treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Body Part for first pass is Gait/Balance; Body Part for second pass is Wound/Burn Care; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; OK; The members functional deficits are moderate; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; The hip is beign treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; The Pelvis/Pelvic Floor is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; The hip is beign treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvis; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvis; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; The Pelvis/Pelvic Floor is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvis; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvis; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Knee; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Knee; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Knee; 05/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
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4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Knee; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 3/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 -	Physical		97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun
6/30/2022	Medicine	Approval	training (includes stair climbing)		1 2022 2022
4/1/2022 -	Physical		97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun
6/30/2022	Medicine	Approval	training (includes stair climbing)		1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beigng treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beigng treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is beigng treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/16/2022; L Hip labral tear repair and femoroplasty; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip was selected as the first body type/region; Vestibular Rehab selected as the second body type/region; Body Part for second pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Mild objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/29/2022; RT THA; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/5/2022; Total Hip Arthroplasty; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 05/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/26/2022; part. hip replacement; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 12/10/2021; closed fracture of distal end of right femur; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip was selected as the first body type/region; Fracture was selected as the second body type/region; Body Part for second pass is Fracture; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Pelvis/Hip request : ; One visit anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Hip/Pelvic; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Hip/Pelvic; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Hip/Pelvic; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 06/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Knee; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Non-Surgical; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Lumbar Spine; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Lumbar Spine; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Lumbar Spine; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Lumbar Spine; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 5/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Knee request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Knee request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Knee request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; Questions about your Knee request; ; The anticipated number of visits is other than 2; ; Three or more visits anticipated; The anticipated number of visits is other than 2; ; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Shoulder; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Shoulder request; ; Three or more visits anticipated; The anticipated number of visits is other than 2; ; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2; ; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Lower Extremity/Hip was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hand; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 03/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvic selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beigng treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beigng treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beigng treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/12/2021; ; Post-Op; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

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4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/26/2022; lumbar discectomy; Post-Op; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

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4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

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4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Pregnancy related lumbopelvic pain best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 6/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Lumbar Spine; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Spine/Chest was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impariments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impariments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impariments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Spine/Chest was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request:; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request:; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 06/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impariments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Spine/Chest was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 06/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability; constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Thoracic Spine/Chest; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Thoracic Spine/Chest request; ; Three or more visits anticipated; The anticipated number of visits is other than 2; ; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Thoracic Spine/Chest; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Thoracic Spine/Chest request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hand; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Questions about your Head/Neck request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hand; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hand; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Hand request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hand; 6/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hip/Pelvic; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; The hip is beign treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hip/Pelvic; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hip/Pelvic; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Head/Neck request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hip/Pelvic; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Lower Leg request: ; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Head/Neck request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Head/Neck request:; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Head/Neck request:; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 03/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request:; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impariments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments without distal symptom best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments without distal symptom best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 04/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 05/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impariments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe functional deficits due to lumbopelvic impariments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 6/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 3/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 04/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Vestibular Rehab was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Vestibular Rehab; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Moderate objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request.; Questions about your Lower Leg request.; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 04/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested

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6/30/2022 4/1/2022

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97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)

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Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested

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4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; You will now be asked some questions about your Vestibular Rehab request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Vestibular Rehab selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Moderate objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Head/Neck was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; You will now be asked some questions about your Vestibular Rehab request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Vestibular Rehab selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Severe objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested

4/1/2022 -  
6/30/2022 4/1/2022 Physical  
Medicine Approval 97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)

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Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested

4/1/2022 -  
6/30/2022 4/1/2022 Physical  
Medicine Approval 97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)

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4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Body Part pass complete; Questions about your Head/Neck request;; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Body Part pass complete; Two Body Parts selected; Second Pass Starting; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Fracture was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Fracture; Body Part for second pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Body Part pass complete; Two Body Parts selected; Second Pass Starting; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Fracture was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Fracture; Body Part for second pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Body Part pass complete; Two Body Parts selected; Second Pass Starting; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Fracture was selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Fracture; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Body Part pass complete; Two Body Parts selected; Second Pass Starting; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Wound/Burn Care selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Wound/Burn Care; Physical Therapy was requested; OK; The members functional deficits are moderate; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Body Part pass complete; Two Body Parts selected; Second Pass Starting; The requesting provider is other than Physical Therapy or Occupational Therapy; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Gait/Balance; Physical Therapy was requested; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request:; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability; constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 05/03/22; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 02/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impariments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impariments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 06/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impariments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Wrist; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Wrist; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Elbow; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request; ; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Elbow; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request; ; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe objective and functional deficits with instability; constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Elbow; 06/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Hand; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Hip/Pelvic; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/6/2022; L rotator cuff repair; Post-Op; Shoulder selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Hip/Pelvic; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Hip/Pelvic; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Hip/Pelvic; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Hip/Pelvic; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/30/2022; CABG; Post-Op; Shoulder selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Questions about your Shoulder request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Knee; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Shoulder request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Knee; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Knee; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Knee; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Shoulder request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Knee; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Shoulder request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Knee; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Knee; 06/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Lumbar Spine; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Lumbar Spine; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Lumbar Spine; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Lumbar Spine; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 04/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/02/2022; stomach surgery; Post-Op; Shoulder selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Shoulder request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Shoulder request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 6/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Shoulder; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Shoulder; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Shoulder; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Shoulder; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Shoulder; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Thoracic Spine/Chest; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Thoracic Spine/Chest; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Thoracic Spine/Chest; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Thoracic Spine/Chest; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Wrist; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Wrist; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Hand; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Hip/Pelvic; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 04/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Lumbar Spine; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is not in options listed; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is not in options listed; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is not in options listed; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is not in options listed; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impariments without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is not in options listed; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impariments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is not in options listed; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Shoulder; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Shoulder; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Shoulder; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Shoulder; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Shoulder; 05/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is Shoulder; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Elbow; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Elbow selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Elbow request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Hand; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Hip/Pelvic; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Shoulder; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Body Part passes complete; Perform Body Part selection; Second Pass check point; Body Part for second pass is Hip/Pelvic; 06/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request.; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Lower Extremity/Hip was selected as the first body type/region; Fracture was selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; None of the above best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/8/2022; Pinning, Pelvis, Percutaneous; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; One Body Part selected; The hip is being treated.; None of the above best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 03/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Knee request: ; One visit anticipated; Neither Pre-Op, Post-Op or Non-Surgical; Therapy type is Rehabilitative; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; KOS, FOTO; KOS: 88.57, FOTO: 67; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 40 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Neither Pre-Op, Post-Op or Non-Surgical; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Lower Extremity/Hip was selected as the first body type/region; Upper Extremity selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 05/03/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/29/2022; ; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; One Body Part selected; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 04/01/22; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request:; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Requestor is not a fax; None of the above; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Requestor is not a fax; None of the above; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 3/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/28/2022; Right Shoulder Open Coraco-Clavicular Ligament Repair/Recon; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 26 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Thoracic Spine/Chest; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; First Pass; Body Part for first pass is Thoracic Spine/Chest; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 3/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/15/2022; surgery to fix lateral epicondylitis of L elbow where MD removed pieces of damaged tendons.; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 01/24/2022; Right cubital tunnel release.; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 05/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 06-02-2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/16/2022; Right Olecranon Osteophyte Excision with Flexor contracture release.; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/17/2022; ORIF with pins; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/15/2022; Dupuytren's Contracture Release; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 3/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/24/22; RIGHT HIP ARTHROPLASTY WITH ALL IP; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 03/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/17/2022; TOTAL HIP JOINT REPLACEMENT; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/09/2022; ; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/05/2022; Total Hip Arthroplasty, right hip; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/11/2022; THA; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/13/2022; TOTAL HIP REPLACEMENT; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/10/2022; ; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/02/2022; s/p THA; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/20/2022; Reduction of closed fracture; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 07/20/2021; total hip; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Spech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/4/2022; LEFT TOTAL HIP ARTHROPLASTY; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/14/2022; OPEN REDUCTION INTERNAL FIXATION LEFT DISTAL HUMERUS OLACLANAN; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/18/2022; RIGHT TOTAL HIP; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beigng treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/03/2022; Arthroscopic labral and acetabular trimming; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/30/2021; patient is a 43-year-old male who presents with a referral from orthopedic specialty to address diagnosis of painful;orthopedic hardware left hip pain. This patient has a history of posttraumatic ORIF to his left hip from a fall incident;from about a 2 ; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/13/2022; Left total hip arthroplasty.; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 8/2/2021; ORIF; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beingn treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/07/2022; Total Hip Arthroplasty; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/22/2022; S/P LEFT TOTAL HIP ARTHROPLASTY; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beigng treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Knee; Hip/Pelvis selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Second Pass Starting; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; PSFS/NIH-CPI; 70%;64%; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The hip is beign treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 03/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 03/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 03/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/03/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 01/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 3/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 03/30/22; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 03/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 03/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Pregnancy related lumbopelvic pain best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 12/01/2018; Spinal cyst removal 4x7cm at distal end of spinal cord under sacrum; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Pregnancy related lumbopelvic pain best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/8/2022; ARTHRODESIS; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/03/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/03/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/04/2004; corrective surgery on low back; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/19/2022; Hyperlipidemia low back DMII; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 05/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/2/2022; S/P RIGHT L5-S1 MIS TLIF W/ALTUS NANO PEDICLE SCREW INSTRUMENTATION BILATERALLY AT L5-S1, ARTHRODESIS AND INTERBODY FUSION WITH AUTO/ALLOGRAFT AND INTERBODY FORTICOR CAGE, BONE ASPIRATION; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/13/2022; LATERAL RECESS DECOMPRESSION L2-5 BILATERALLY L5/S1 ON THE RIGHT; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Pregnancy related lumbopelvic pain best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Pregnancy related lumbopelvic pain best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/01/2022; low back; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/22/2022; RIGHT SI FUSION; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/24/2022; ; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/18/2022; ; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/21/2022; 360* lumbar;fusion on 6/21/22.; Post-Op; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 20 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 8 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Pregnancy related lumbopelvic pain best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 2/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; PLEASE SEE CLINICAL DOCUMENTATION; PLEASE SEE CLINICAL DOCUMENTATION; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Cardiopulmonary Rehab selected as the body type/region; Body Part for first pass is Cardiopulmonary Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; OK; The members functional deficits are moderate; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 9/27/2021; L OPEN TIBIAL NAILING; Post-Op; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Moderate objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/25/2022; Left foot achilles tendon repair.; Post-Op; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Moderate objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/23/2022; amputation; Post-Op; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/26; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Cardiopulmonary Rehab selected as the body type/region; Body Part for first pass is Cardiopulmonary Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; OK; The members functional deficits are moderate; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04-20-2020; Cervical Spinal Fusion; Post-Op; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 1/17/2022; L ankle ORIF; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05-05-2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/13/2022; Lower left leg reconstruction.;Rod, plates and screw fixations.;Closed displaced comminuted fracture of shaft of left tibia;Closed trimalleolar fracture of left ankle; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/4/2022; Cervical Disc Arthroplasty; Post-Op; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Mild objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Cardiopulmonary Rehab selected as the body type/region; Body Part for first pass is Cardiopulmonary Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; OK; The members functional deficits are moderate; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/24/2022; ; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Severe objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/12/2022; Orif right fibula; Post-Op; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request; ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request; ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impariments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/17/2022; CABG; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Cardiopulmonary Rehab selected as the body type/region; Body Part for first pass is Cardiopulmonary Rehab; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; OK; The members functional deficits are moderate; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Cardiopulmonary Rehab selected as the body type/region; Body Part for first pass is Cardiopulmonary Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; OK; The members functional deficits are moderate; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/22/2022; D and C hysterectomy; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Severe objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/26/2022; Laparoscopic Cholecystectomy; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/16/2022; CS-C7 ACF; Post-Op; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/23/2022; Laparoscopic Cholecystectomy; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/01/2022; Cervical Fusion; Post-Op; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Moderate objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/13/2022; M96.672 ORTO IMPLANT PLATE IN LEFT LEG GUN SHOT WOND; Post-Op; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/25/2022; ; Post-Op; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/29/2022; Bilateral lower extremity below-knee amputation.; Post-Op; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/14/22; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Cardiopulmonary Rehab selected as the body type/region; Body Part for first pass is Cardiopulmonary Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; OK; The members functional deficits are mild; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/12/2022; ORIF Tibia Plateau; Post-Op; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Moderate objective and functional deficits best describes the patient presentation; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/27/2022; Emergency Craniotomy; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/9/2022; closed fracture of proximal phalanx right index finger; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/16/2022; right below the knee amputation; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Neither Pre-Op, Post-Op or Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; No Second Pass; Fracture selected as the body type/region; Body Part for first pass is Fracture; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; No Second Pass; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 16 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; No Second Pass; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 24 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; You will now be asked some questions about your Vestibular Rehab request.; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Vestibular Rehab selected as the body type/region; Body Part for first pass is Vestibular Rehab; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Mild objective and functional deficits best describes the patient presentation; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 02/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/10/2022; LEFT REVERSE (TSA); Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 03/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/15/2022; labral repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 03/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/11/2022; IMPINGEMENT SYNDROME LEFT SHOULDER ROTATOR CUFF TEAR LEFT; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04-11-2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04-08-2022; s/p L shoulder ASX possible anterior and posterior labral repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/17/2022; ; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/04/2022; repair right femur fracture; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/21/2022; Slap repair, rotator cuff repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/11/2022; RTC REPAIR; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/06/2022; bicipet tear; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/23/2022; Rotator cuff repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/8/2022; R RC Repair with Biceps Tenodesis; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/31/2022; Right shoulder arthroscopy; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/11/2022; Right shoulder arthroscopic rotator cuff tear, biceps tenotomy, and subacromial decompression.; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/19/2022; ; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/07/2022; Open reduction internal fixation right midshaft humerus; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/03/2022; shoulder arthroscopy; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/18/2022; ORIF L Shoulder; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/4/2022; LEFT SHOULDER ARTHOSCOPY WITH EXTENSIVE DEBRIDEMENT AND MANIPULATION; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/14/2022; Left Total Shoulder; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/30/2022; Left shoulder labral repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/6/2022; shoulder arthroscopy; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2. ; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05-10-2022; total shoulder replacement; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2. ; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2. ; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/22/2022; Rotator Cuff Repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2. ; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/29/2022; rotator cuff repair - right shoulder; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/18/2022; ROTATOR CUFF REPAIR; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/24/22; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/31/2022; Reverse total shoulder; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/16/2022; Left rotator cuff repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/10/2022; ; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/11/2022; RIGHT COMPLETE RCT; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/20/2022; R Bankart arthroscopic repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/2/2022; RIGHT REVERSE TOTAL SHOULDER; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/06/2022; arthroscopy of left shoulder; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/17/2022; Right shoulder surgery; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/27/2022; ARTHROSCOPY BEACH CHAIR, RIGHT SHOULDER. ARTHROSCOPIC SUBACROMIAL BURSECTOMY, RIGHT SHOULDER. ARTHROSCOPIC ABRASION ACROMIOPLASTY AND RELEASE CORACOACROMIAL LIGAMENT, RIGHT SHOULDER. ARTHROSCOPIC DOUBLE ROW ROTATOR CUFF REPAIR, RIGHT SHOULDER UTILIZING SIX; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/20/2022; patient is a 52-year-old right-hand dominant female who presents approximately 2 weeks status post dominant right shoulder;arthroscopic cleanout/repair for brachial plexopathy. Patient reports chronic complicated rehabilitation after initial fall incident; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/27/2022; Open rotator cuff repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/12/2022; rotator cuff; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/09/2022; Rotator cuff repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/26/2022; left shoulder arthroscopy with capsulorrhaphy and labral repair.; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/4/2022; PROCEDURE PERFORMED: .1.Right shoulder arthroscopy with debridement of calcific tendinitis, right rotator cuff;.2.Right rotator cuff repair;.3.Distal clavicle resection.; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/16/2022; Lt. SHOULDER ARTHROSCOPY WITH DISTAL CLAVICE RESECTION AND GLENOHUMERAL DEBRIDEMENT; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/17/2022; RIGHT SHOULDER ARTHROSCOPIC ROTATOR CUFF REPAIR, SUBACROMIAL DECOMPRESSION, DISTAL CLAVICAL EXCISION. WE ALSO MANIPULATED THE SHUOLDER.; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/01/2022; anterior bankart repair right shoulder; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/15/2022; Azromioclavicular open dislocation repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/27/2022; Manipulation of left shoulder requiring anesthesia; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/25/2022; R bankart repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/16/2022; Right Rotator Cuff Repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 03/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 04/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 04/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 05/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/28/2022; posterior cervical disectomy and fusion; Post-Op; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe functional deficits due to thoracic/lumbar impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/15/2022; R CTR; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/8/2022; surgical intervention to R wrist for carpal tunnel.; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/20/2021; Carpel Tunnel Release R Wrist; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/13/2022; Left wrist distal radius ORIF; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/16/2022; L scaphoid excision with 4 corner fusion, and L cubital tunnel and carpal tunnel release; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/2/2022; S/P LEFT ORIF OF RADIUS/ULNA; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/16/2022; Open reduction and internal fixation, right distal radius fracture.; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Second Pass check point; Body Part for first pass is Lumbar Spine; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/29/2022; right hip arthroscopy with labral debridement and CAM resection; Post-Op; One visit anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation related to a diagnosis of cancer.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Physical Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Second Pass check point; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical Therapy; Physical therapy was requested	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is Hip/Pelvic; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/24/2022; L femoral antegrade closed reduction intramedullary fixation and craniotomy; Post-Op; Knee selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/03/2022; Cervical Fusion; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Head/Neck request:; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 03/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03-21-2022; total knee replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/30/2022; ACL reconstruction with meniscal repair; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 11/05/2021; Open reduction internal fixation R tibia; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/7/2022; Total Knee Replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/13/2022; Left ACL; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04-19-2022; Left total knee arthroplasty.; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/20/2022; RIGHT TOTAL KNEE SURGERY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/18/2022; Right Total Knee Arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/19/2022; ORIF- UNICONDYLAR LEFT TIBIAL PLATEAU FRACTURE WITHOUT INTERNAL FIXATION; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/10/2022; Total knee revision left knee; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/10/2022; LEFT TOTAL KNEE ARTHROPLASTY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/10/2022; Right Total Knee Arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/23/2022; Left total knee replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/24/2022; TOTAL KNEE REPLACEMENT; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/24/2022; Left ACL reconstruction; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/1/2022; Total Knee Arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/07/2022; Right Total Knee Replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/07/2022; TKA Left; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/13/2022; S/P LEFT KNEE ACL RECON WITH BPTBA, LMR VS PLM, AIP; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/15/2022; Left total knee replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/15/2022; Right total knee; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/14/2022; ; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 01/04/2022; RT. total knee arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/8/2022; ; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/23/2022; partial right knee arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/4/2022; ; Post-Op; Knee selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Knee request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/8/2022; LEFT PMM, SUPINE, GENERAL; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Post-Op; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/28/2022; (R) knee scope; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Post-Op; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; First Pass; Body Part for first pass is Knee; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/18/2022; KNEE ARTHROSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Post-Op; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/18/2022; KNEE ARTHROSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Post-Op; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/3/2022; L Knee hardware removal; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Post-Op; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/15/2022; L TKA; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Post-Op; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/23/2022; left knee arthroscopy with partial medial meniscectomy; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Post-Op; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 03/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/23/2022; left knee arthroscopy; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04-14-2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04-12-2022; s/p L knee ax w PLM of discoid lateral meniscus; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/25/2022; RIGHT KNEE ARTHORSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/28/2022; Right Total Knee Replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/30/2022; Total Knee Arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/30/2022; Meniscus removal and clean out; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/1/2022; S/P LEFT KNEE ASX PMM; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/2/2022; RIGHT KNEE MEDIAL MENISCUS ROOT REPIAR; RIGHT KNEE SIMPLE ARTHROSCOPIC CHINDROPLASTY, PATELLOFEMORAL COMPARTMENT; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04-08-2022; arthroscopic partial meniscectomy secondary microfracture arthroplasty rochlea 3 chondroplasty medial femoral condyle; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/06/2022; KNEE ARTHROSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/5/2022; Left Knee Arthroscopy; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request : ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/13/2022; Total knee replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/8/2022; Meniscal repair; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/5/2022; ; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/11/2022; Knee arthroscopy with debridement and chondroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/24/2022; LEFT KNEE A&A; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/18/2022; TOTAL KNEE REPLACEMENT; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/15/2022; LEFT KNEE SCOPE; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/13/2022; ACL Reconstruction; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/11/2022; L KNEE SCOPE; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/20/2022; right knee scope; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/25/2022; Right knee arthroscopic partial medial meniscectomy and chondroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/1/2022; LEFT KNEE ARTHROSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/29/2022; Arthroscopic partial medial and lateral meniscectomies 2 microfracture arthroplasty medial femoral condyle and trochlea; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/26/2022; Right Total Knee replacement; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/05/2022; Right knee arthroscopy with ACL reconstruction and PMM; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/20/2022; R Knee Scope; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/11/2022; TOTALL KNEE REPLACEMENT; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/10/2022; KNEE ARTHROSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/13/2022; arthroscopic partial medial and lateral meniscectomy, and microfracture medial femoral condyle; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05-16-2022; R ACL Reconstruction; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/11/2022; Knee arthroscopy, MPFL reconstruction, trochleoplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/13/2022; RIGHT KNEE ARTHROSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/17/2022; S/P R KNEE ASX C PMM, AIP; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/12/2022; R MEDICAL MENISCECTOMY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/20/2022; Knee Arthroscopy; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/25/2022; Right Knee Scope, ACL Reconstruction with Quad Tendon Autograft; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06-24-2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06-10-2022; Left knee arthroscopy tibial transfer, lateral release, vastus medialis obliquus advancement.; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/31/2022; Left knee lateral retinacular release; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/15/2022; ; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/2/2022; L meniscectomy; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/03/2022; Arthroscopic partial medial lateral meniscectomies with significant adhesion debridement and chondroplasty patella and medial femoral condyle; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/3/22; Right Knee Scope; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/2/2022; right total knee arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/06/2022; Left Knee Arthroscopy; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/10/2022; Right knee arthroscopic partial medial and lateral meniscectomy and chondroplasty of the patella, lateral femoral condyle, and lateral tibial plateau.; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/15/2022; RT. ACL revision; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/6/2022; ARTHROSCOPY OF THE RIGHT KNEE WITH:;1. PATRIAL MEDIAL MENISCECTOMY;2. RECONSTRUCTION OF THE ANTERIOR CRUCIATE LIGAMENT USING CENTRAL ON THIRD BONE-TENDON-VONE AUTOGRAFT; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/17/2022; Right knee arthroscopic partial medial meniscectomy and chondroplasty of the patella and medial femoral condyle.; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/3/2022; ; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/20/2022; left knee orthoplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/06/2022; R ACL REVISION; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/8/2022; ARTHROSCOPY OF THE RIGHT KNEE FOLLOWED BY ARTHROSCOPIC-ASSISTED RECONSTRUCTION OF THE ANTERIOR CRUCIATE LIGAMENT, RIGHT KNEE, USING BONE-TENDON-BONE AUTOGRAFT; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/20/2022; knee laparoscopy; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/20/2022; left total knee arthroplasty; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/21/2022; Total Knee Replacement - Right; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 06/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/24/2022; ; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/24/2022; PARTIAL LATERAL MENISCETOMY, MICROFRACTURE ARTHROPLASTY, TROCHLEA; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06-10-2022; Arthroscopy of right knee; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/23/2022; arthroscopic patial lateral mesicestmy and chondroplasty of medial femoral condyle; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/24/2022; LEFT KNEE ARTRHOSCOPY; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is not in options listed; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Hand request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; The hip is beingn treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Knee request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; Questions about your Lumbar Spine request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; Lumbar Spine selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; Questions about your Lumbar Spine request; ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; Questions about your Knee request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/6/2022; Foot reconstruction; Post-Op; Foot/Ankle selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Foot/Ankle; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Foot/Ankle; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 2/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 11/2021; SURGICAL DEBRIDEMENT AND ACHILLES REPAIR; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; LOWER EXTREMITY FUNCTIONAL INDEX; 17.5% FUNCTIONAL; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 01/11/2022; Right Foot Surgery; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/1/2022; S/P PLANTAR FASCIA RELEASE LEFT; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/3/2022; RIGHT FOOT AMPUTATION; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 10/13/2021; Left bunionectomy; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 01/21/2022; Achilles lengthening and triple arthodesis; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/18/2022; bone spurs tearing at her achilles tendon; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/18/2022; left lapidus/Akin bunionectomy; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/15/2022; ACHILLES TENDON REPAIR - LEFT; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request id for the Foot.; This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; Questions about your Knee request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; Questions about your Knee request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; Body Part for second pass is not in options listed; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; ; Questions about your Knee request ; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/3/2022; left achilles tendon repair; Post-Op; Lumbar Spine selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; ; Questions about your Lumbar Spine request ; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Elbow; 2/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Elbow selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; Questions about your Elbow request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; Questions about your Knee request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Knee; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; Questions about your Knee request ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request ; Questions about your Lower Leg request ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 12/28/2021; LT Ankle; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/08/2021; Surgery to repair closed bimalleolar fracture of left ankle.; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/16/2022; PREOPERATIVE DIAGNOSIS: Bimalleolar right ankle fracture; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/28/2022; hardware removal right ankle; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/24/2022; S/P LEFT MEDIAL SLIDE CALC OSTEOTOMY, KIDNER PROCEDURE; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 12/28/2021; right ankle fracture repair; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/3/2022; LEFT ACHILLES TENDON RUPTURE REPAIR; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/11/2022; ORIF ANKLE (DISTAL TIBIA/FIBULA);CPT(R) Code: 27823 - OPEN TX TRIMALLEOLAR ANKLE FX W FIX PST LIP; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 01/21/2022; Left open tilon fracture.; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 7/20/2021; Right ankle FX ORIF; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/15/2022; Left Ankle Peroneal Muscle Group; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/25/22; ORIF; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/15/2022; Right ankle arthroscopy with extensive debridement, Right modified Bromstrom Gould lateral ankle ligament reconstruction, Right peroneal brevis tendon debridement with secondary, Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/5/2022; S/P Achilles Repair; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 12/27/2021; ORIF of Left Ankle; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 1/28/2022; STATUS POST LATERAL ANKLE STABILIZATION, LEFT ANKLE; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/31/2022; Achilles Detachment/Reattachment; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/25/2022; S/P LEFT ANKLE OPEN REDUCTION WITH INTERNAL FIXATION VIA POSTERIOR LATERAL APPROACH; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/25/2022; Plates and screws; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request; ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 06/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	<p>This request is for the Ankle.; This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/14/22; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 11/2021; Sx of R and L Achilles;11/4/2021 and 11/8/2021; Post-Op; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 06/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/03/2022; CLOSED FRACTURE OF RIGHT LATERAL MALLEOLUS; Post-Op; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	This request is for the Ankle.; This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	01/10/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	01/19/2022; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	2/9/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	2/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; Peabody Developmental Motor Scale - 2;;Beery Test of Visual Motor Integration;;Toddler Sensory Profile - 2 ;;Pediatric Evaluation of Disability Inventory; 5th - 7th; Standardized tests document a deficit at or below the 10th percentile; Requestor is not a fax; Patient requires human assistance for age appropriate basic activities of daily living; Occupational Therapy; Speech Therapy was not selected; Occupational Therapy was requested; The evaluation date is not in the future; The member is 1-9 years old.; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	2/16/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/2/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/7/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/9/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	03/10/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/10/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/14/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	03/22/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/24/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	03/30/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; Adolescent/Adult Sensory Profile;Reflexes / MT: Developmental Reflexes;Leisure - Adults; ; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Occupational Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; Other/none of the above; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	04/04/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/10/2022; Wrist fusion and carpal tunnel release; Post-Op; Two visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; unknown; Unknown; Standardized tests document a deficit at or below the 10th percentile; Requestor is not a fax; Patient presents with mild functional decline that needs to be addressed; Occupational Therapy; Speech Therapy was not selected; Occupational Therapy was requested; The evaluation date is not in the future; The member is 1-9 years old; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/30/2022; LAMINECTOMY; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/7/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	04/08/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/8/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/29/2022; RCTR,Right index,long,ring repair EDC and tendon transfer,right wrist scope and wafer resection,poss ulnar shortening osteotomy; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/11/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022







4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	05/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 01/11/2022; Mastectomy; Post-Op; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/20/2022; CARPAL TUNNEL SURGERY, ;INCISE FINGER TENDON SHEATH, ;REPAIR ELBOW W/DEB, OPEN, ;REVISE ULNAR NERVE AT ELBOW, ; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/9/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation related to a diagnosis of cancer.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	05/10/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/10/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/12/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/17/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Therapy type is Habilitative; na; na; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Occupational Therapy was requested; The evaluation date is not in the future; The Member is 10 years old or older.; There has been a recent decline in function requiring skilled care; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Habilitative; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	05/20/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/10/2022; RIGHT CARPAL TUNNEL RELEASE; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	05/23/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/24/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/13/2022; LEFT REV CUTR, MEDIAL EPICONDYLE DEBRIDEMENT W/POS REPAIR, BWS; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	05/26/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	5/26/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 3 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/13/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 1/7/2022; CVA is the selected condition; Date of onset is more than 4 months ago; Therapy type is Neuro Rehabilitative; The patient requires human assistance to dress, groom, feed and toilet self; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Occupational Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/2/2022; LEFT CUBITAL TUNNEL RELEASE, LEFT CARPAL TUNNEL RELEASE; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/3/2022; REPAIR LMF EDC EXTENSION PINNING OF PIP1; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/15/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	06/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Gait, Balance and Falls is the selected condition; None of the listed conditions were selected; Therapy type is Neuro Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Occupational Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Three or more visits anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	06/21/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/22/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/10/2022; LEFT CARPAL TUNNEL SURGERY; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/7/2022; Right carpal tunnel release; Post-Op; One visit anticipated; Therapy type is Rehabilitative; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	06/24/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	06/27/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; CVA is the selected condition; 3/22/2022; CVA is the selected condition; Date of onset is within the last 4 months; Therapy type is Neuro Rehabilitative; The patient requires human assistance to dress, groom, feed and toilet self; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; Occupational Therapy was requested; The evaluation date is not in the future; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Neuro Rehabilitative; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	6/29/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	08/31/2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	12/01/2021; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1 2022 2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	12/8/21; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	12/29/2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part for first pass is Shoulder; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Neither Pre-Op, Post-Op or Non-Surgical; Requestor is not a fax; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; Body Part for second pass is Wrist; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Elbow request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is Hand; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is Shoulder; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is Wrist; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/24/2022; repair wrist; Post-Op; Hand selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is Wrist; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is Wrist; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is Wrist; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; 05/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; The Pelvis/Pelvic Floor is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvis; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; The hip is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Head/Neck request;; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 06/08/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Fracture was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Fracture; Body Part for second pass is Gait/Balance; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Occupational Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Lower Leg selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request; ; Questions about your Lower Leg request; ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 5 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 02/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022





4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 05/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Shoulder request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 05/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits without instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability; sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Shoulder; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Thoracic Spine/Chest; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments with distal symptoms best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Wrist; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Body Part for second pass is not in options listed; 3/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request.; Questions about your Head/Neck request; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Hand; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/24/2022; left wrist irrigation and debridement of skin; Post-Op; Wrist selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Hand; 05/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Hand; 06/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Hand; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Shoulder; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	<p>Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Wrist; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Wrist; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Body Part passes complete; Perform Body Part selection; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Lower Leg request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Body Part for first pass is Lower Leg; Body Part for second pass is Lower Leg; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Occupational Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; One visit anticipated; One visit anticipated; This is not a gold-card auth; Questions about the subsequent request: ; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Occupational Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; Two visits anticipated; Two visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Elbow; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Hand; 5/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/8/2022; CARPAL TUNNEL SURGERY; INCISION OF TENDON SHEATH; REVISE ULNAR NERVE AT ELBOW; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Hand; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; One Body Part selected; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Hand selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; Shoulder selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Wrist; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/22/2022; right wrist scope,ulnar partial styloid exc, right wrist ECU tendon stab, poss right radial tumor exc exostosis; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; First Pass; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; One Body Part selected; None of the above best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/24/2022; RIGHT ELBOW EXT/LCL REPAIR; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/3/2022; single incision, left distal biceps repair; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/18/2022; EXPLORATION OF RIGHT FOREARM, REPAIR OF FLEXOR TENDONS, DORSAL SENSORY BRANCH OF ULNAR NERVE; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/6/2022; LEFT CTR, LEFT CUB T R W/UNT, INJECT RCT, RIGHT MEDIAL ELBOW; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/13/2022; Repair his elbow; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/23/2022; Right thumb MP radial collateral ligament repair w/ joint pinning; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04-08-2022; surgical procedure; Right 5TH Metacarpal open reduction with internal fixation.; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/31/2022; S/P EXC GANGLION CYST RIGHT INDEX FINGER; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/11/2022; S/P left 1st dorsal compartment release 4/11/2022; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/03/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/28/2022; extensor muscle repair; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/26/2022; right 5th metacarpal shaft fracture; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/11/2022; right long finger radial hood repair; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/05/2022; tendon laceration repair; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/12/2022; repair metacarpal fracture; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/15/2022; carpal tunnel release; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/23/2022; REPAIR OF LEFT THUMB ZONE 2 FLEXOR TENDON LACERATION; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 05/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 6/1/2022; RSF FLEXOR TENDON REPAIR; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/02/2022; LT. middle finger FDS and FDP repair; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request.; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request.; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request.; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request.; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/12/2022; R superior trapezius muscle transfer to proximal humerus, R small finger tendon transfer vs. metacarpophalangeal volar plate advancement; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/25/2022; LEFT ECTR UNR; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 6/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/24/2022; (R) thumb CMCJ arthroplasty with suspension partial trapezoid resection; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/10/2022; LF and RF trigger finger release; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 06/03/2022; Curettage, left long finger proximal phalanx neoplasm with distal radius bone graft to left long finger proximal phalanx.; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 06/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 12/14/2021; RIGHT DISTAL RADIUS ORIF; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Occupational Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 5/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Occupational Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Occupational Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Post surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 06/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 6/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 3/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; None of the above; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Head/Neck; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Occupational Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; No Second Pass; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Occupational Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request.; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 3/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/05/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/18/2022; PROCEDURES PERFORMED: ;1.Right shoulder arthroscopy with limited debridement.;2.Decompression, paralabral cyst.;3.Distal clavicle resection.;4.Open biceps tenodesis, right shoulder.; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/6/2022; RIGHT SHOULDER SCOPE WITH SUBAROMIAL DECOMPRESSION WITH OPEN ROTATOR CUFF REPAIR; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/05/2022; Right reverse total shoulder arthroplasty; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/1/2022; RTC Repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/21/2022; ROTATOR CUFF REPAIR; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 4/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/4/2022; ; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/19/2022; S/P ROTATOR CUFF REPAIR, LIMITED DEBRIDEMENT, SUB ACROMIAL DECOMPRESSION, AND DISTAL CLAVICLE EXCISION; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/30/2022; TSA; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/23/2022; RT. shoulder arthroscopy with bicep tenodesis with SAD,DCR and labral debridement; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/19/2022; ; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/10/2022; Open subpectoral biceps tenodesis Left ;arthroscopic limited debridement of partial articular rotator cuff tear Left; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits without instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 06/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/27/2022; right arthroscopic labral repair and remplissage; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 6/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/03/2022; right RTC tear; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/9/2022; GSW S/P I&D / ORIF LEFT OPEN ULNA FRACTURE; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/28/2022; right forearm s/p embolization for venous malformation; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/22/2022; RIGHT WRIST SCOPE WITH POSS ECU REPAIR; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/1/2022; open reduction and internal fixation, left greater than three-part intra-articular distal radius fracture; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 04/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04-21-2022; IRRIGATION AND DEBRIDEMENT, LEFT RADIUS;COMPLEX WOUND CLOSURE, 6 CM;OPEN REDUCTION AND INTERNAL FIXATION OF LEFT RADIUS SHAFT; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/13/2022; OPEN REDUCTION AND INTERNAL FIXATION OF RIGHT PROXIMAL ULNA FRACTURE, ARTICULARE FRACTURE INCLUDING CORONOID AND OLECRANON; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/25/2022; RIGHT WRIST ANTHROSCOPY WITH DEBRIDEMENT OF SYNOVITIS, RIGHT WRIST. OPEN REPAIR OF RIGHT SCAPHOLUNATE LIGAMENT.; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 04/07/2022; Open reduction internal fixation, right distal radius, intra-articular, closed, 3 fragments.; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/13/2022; CARPAL TUNNEL SX, INCISION OF TENDON SHEATH, NERVE GRAFT, HAND, REMOVAL OF WRIST BONE, REPAIR WRIST JOINT, SKIN TISSUE REARRANGEMENT, TRANSPLANT HAND TENDON, WRIST ARTHROSCOPY/SURGERY; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/26/2022; ORIF left distal radius; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 6/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/22/2022; Carpal Tunnel Release Left; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 06/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/24/2022; carpal tunnel release; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Perform Body Part selection; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Second Pass check point; Body Part for first pass is Shoulder; 06/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; No Second Pass; Requestor is not a fax; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes		Perform Body Part selection; Second Pass check point; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes		Perform Body Part selection; Second Pass check point; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is related to a diagnosis of Lymphedema.; Occupational Therapy was requested; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes		Perform Body Part selection; Second Pass check point; Body Part for first pass is Wrist; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Questions about your Wrist request: ; One visit anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		To evaluate primary biliary cholangitis and reported;cirrhosis of the liver; This study is being ordered for Inflammatory/ Infectious Disease.; 2016; There has been treatment or conservative therapy.; elevated antimitochondrial antibody of 79.6 (normal range is 0-20) and an elevated smooth muscle antibody of 95 (normal range is;0-19); compliant with ursodiol;Banding; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a suspicious infection or abscess.; Surgery is NOT scheduled in the next 30 days.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	There is not a suspicion of an infection or abscess.; This examination is NOT being requested to evaluate lymphadenopathy or mass.; There is not a suspicion of a bone infection (osteomyelitis); There is a suspicion of an orbit or face neoplasm, tumor, or metastasis.; This is a request for an Orbit MRI; There is not a history of orbit or face trauma or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	19 yo with HG extramedullary spinal tumor (C6-T2) NOS status post resection 10/23/2017 and RT. Rec Mar/May 2018 status post resection 05/18. VDC/IE completed 1/2019. On NPPT TMZ/Irino. Exams are for disease evaluation at St. Jude Children's Research H; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	will upload/fax in clinicals if needed; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with an Epidural.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	19 yo with HG extramedullary spinal tumor (C6-T2) NOS status post resection 10/23/2017 and RT. Rec Mar/May 2018 status post resection 05/18. VDC/IE completed 1/2019. On NPTP TMZ/Irino. Exams are for disease evaluation at St. Jude Children's Research H; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	19 yo with HG extramedullary spinal tumor (C6-T2) NOS status post resection 10/23/2017 and RT. Rec Mar/May 2018 status post resection 05/18. VDC/IE completed 1/2019. On NPTP TMZ/Irino. Exams are for disease evaluation at St. Jude Children's Research H; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Age-indeterminate L1 compression fracture with 75% loss of vertebral height from the superior endplate, age-indeterminate mid to lower thoracic compression fracture of approximately T9-10, with 30% loss of vertebral height.; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	19 yo with HG extramedullary spinal tumor (C6-T2) NOS status post resection 10/23/2017 and RT. Rec Mar/May 2018 status post resection 05/18. VDC/IE completed 1/2019. On NPTP TMZ/Irino. Exams are for disease evaluation at St. Jude Children's Research H; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Age-indeterminate L1 compression fracture with 75% loss of vertebral height from the superior endplate, age-indeterminate mid to lower thoracic compression fracture of approximately T9-10, with 30% loss of vertebral height.; This study is being ordered for Trauma / Injury; There are NO neurological deficits on physical exam	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 04/12/22; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Not improving despite medication; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/1/2022; There has been treatment or conservative therapy.; tailbone pain;low back pain; medication / X-ray in office/ lifestyle adjustment; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	4	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Not improving despite medication; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 1/1/2022; There has been treatment or conservative therapy.; tailbone pain;low back pain; medication / X-ray in office/ lifestyle adjustment; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	72198 Magnetic resonance angiography, pelvis, with or without contrast material(s)	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for Vascular Disease.; four months or more; There has been treatment or conservative therapy.; pelvic pain, radiates down leg, painful intercourse; physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	UNKNOWN; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a hip CT.; This study is not being ordered in conjunction with a pelvic CT.; There is not a suspected infection of the hip.; The patient has not been treated with and failed a course of supervised physical therapy.; There is not a mass adjacent to or near the hip.; "There is no a history (within the last six months) of significant trauma, dislocation, or injury to the hip.;" There is not a suspicion of AVN.; The patient does not have an abnormal plain film study of the hip other than arthritis.; The patient has used a cane or crutches for greater than four weeks.; The patient has a documented limitation of their range of motion.; The patient has been treated with anti-inflammatory medication in conjunction with this complaint.; This study is not being ordered by an operating surgeon for pre-operative planning.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	CONSISTENT PAIN.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6/30/2016; There has been treatment or conservative therapy.; PAIN. RESTLESS LEGS SYNDROME. OSTEOARTHRITIS. DEGENERATION OF LUMBAR INTERVERTEBRAL DISC; PAIN MEDICATION. ACTIVITY MODIFICATION; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 04/12/22; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	pain; This study is being ordered for trauma or injury.; 07/05/2022; There has not been any treatment or conservative therapy.; Pain ;swelling; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology SEE CLINICALS; This study is being ordered for Inflammatory/ Infectious Disease.; SEE CLINICALS; There has been treatment or conservative therapy.; SEE CLINICALS; SEE CLINICALS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee brace; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is not taking antibiotics.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 04/12/22; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for post-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; It is not known if this is the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; It is not known if this is the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74181	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	To evaluate primary biliary cholangitis and reported;cirrhosis of the liver; This study is being ordered for Inflammatory/ Infectious Disease.; 2016; There has been treatment or conservative therapy.; elevated antimitochondrial antibody of 79.6 (normal range is 0-20) and an elevated smooth muscle antibody of 95 (normal range is;0-19); compliant with ursodiol;Banding; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	74185	Magnetic resonance angiography, abdomen, with or without contrast material(s)	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for Vascular Disease.; four months or more; There has been treatment or conservative therapy.; pelvic pain, radiates down leg, painful intercourse; physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78451	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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78451	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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/3/2022; There has been treatment or conservative therapy.; chest pain and shortness of breath; The Patient has been on medication for her heart; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78451	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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; It is not known if the member has known or suspected coronary artery disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78451	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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for congestive heart failure.; The member does not have known or suspected coronary artery disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78451	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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	2	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Melanoma.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the regional lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Surveillance following the completion of therapy or treatment without new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Colo-rectal Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This nodule is New (recently diagnosed); It is unknown if the nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; 01/01/2021; Neuro Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The patient recently suffered either a CVA or TBI; 04/19/2022; The evaluation date is not in the future; The primary condition is not Cognitive Linguistic Impairment, Dysphagia, Executive function, Aphasia/Apraxia or Voice; Date of onset is more than 6 months ago; Three or more visits anticipated; Therapy type is Neuro Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is feeding or dysphagia; 4/26/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65; The member is NOT currently on tube feeds	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Mild functional deficits supported by standardized assessments; The member is 0-3 years old; Language: Preschool Language Scale- Fifth Edition (PLS-5);Language: Receptive-Expressive Emergent Language Test, Third Edition (REEL-3);Hearing;Voice and Resonance;Oral Peripheral;Fluency;Articulation; please see Speech Evaluation; 01/04/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Mild functional deficits supported by standardized assessments; The patient is between 4 and 8 years old; 2/28/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Habilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The condition being treated is language or articulation; Moderate to severe functional deficits supported by standardized assessments; The patient is between 4 and 8 years old; 3/3/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Habilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Rehabilitative; Requestor is not a fax; Speech Therapy; Speech Therapy was selected; The primary condition is Voice; The patient has not recently suffered either a CVA or TBI; 04/08/2022; The evaluation date is not in the future; Three or more visits anticipated; Therapy type is Rehabilitative; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested; The patient is under the age of 65	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Speech Therapy; 10/5/2021; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 03/10/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 03/31/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 04/07/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 4/7/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 5/18/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 6/3/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 6/8/2022; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 08/19/2021; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 11/25/2020; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	92507 Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	Radiology Services Denied Not Medically Necessary	Patient history in the past 90 days; Requestor is not a fax; Speech Therapy; 11/30/2021; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Speech Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Enter date of initial onset here - or Type In Unknown If No Info Given &gt;2021; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given &gt; Dizziness, chest pain and shortness of breath; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 5/3/2022; There has been treatment or conservative therapy.; chest pain and shortness of breath; The Patient has been on medication for her heart; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Need to see if pt's heart is healthy or not.; This study is being ordered for Vascular Disease.; 07012021; There has not been any treatment or conservative therapy.; Shortness of Breath;Chest pain;Palpitations; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; The atrial fibrillation and/or atrial flutter is pre-existing.; Atrial fibrillation and/or atrial flutter best describes the reason for ordering this study.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	Need to see if pt's heart is healthy or not.; This study is being ordered for Vascular Disease.; 07012021; There has not been any treatment or conservative therapy.; Shortness of Breath;Chest pain;Palpitations; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary		2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	1/17/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	1/21/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	1/23/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	01/24/2022; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	01/24/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	01/26/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	01/27/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	2/1/2022; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1 2022	Apr-Jun 2022























4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	11/7/2021; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	11/17/2021; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	11/18/2021; Patient history in the past 90 days; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	12/6/2021; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	12/8/21; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Physical Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2; ; The anticipated number of visits is other than 2; ; Two Body Parts selected; Second Pass Starting; The hip is beign treated.; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvic; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is beign treated.; The Pelvis/Pelvic Floor is being treated.; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; The hip is being treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Lumbar Spine; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; The hip is beigng treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation;; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; 5/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; Lumbar Spine selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Hip/Pelvic; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Questions about your Head/Neck request:; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Head/Neck request:; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Body Part pass complete; Two Body Parts selected; Second Pass Starting; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Fracture was selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Fracture; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Lumbar Spine; 3/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is Lumbar Spine; 06/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Questions about your Shoulder request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Mild or moderate objective and functional deficits with instability: sporadic symptoms with minimal to moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 3/30/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for second pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Shoulder request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hand; 6/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/19/2022; R LF P 1 ORIF; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 3/29/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The hip is beign treated.; None of the above best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The hip is being treated.; None of the above best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; 05/02/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The hip is being treated.; None of the above best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; One Body Part selected; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 4/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 5/2/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 5/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; 6/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Enter name of tool here Enter score here Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; KOS, FOTO; KOS: 88.57, FOTO: 67; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 41 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Lower Extremity/Hip was selected as the first body type/region; Upper Extremity selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 3/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/7/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 04/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/6/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Two Body Parts selected; None of the above best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Head/Neck selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 3/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 3/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 3/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; None of the above; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 04/01/22; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Requestor is not a fax; None of the above; Head/Neck was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 4/15/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; None of the above; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 05/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/05/2022; Cervical fusion with decompression; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls was selected as the first body type/region; Head/Neck selected as the second body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 5/31/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Requestor is not a fax; None of the above; Head/Neck was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request;; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Head/Neck request;; Two Body Parts selected; None of the above; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 03/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; Two Body Parts selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/17/2022; arthroscopy; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/19/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 04/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 4/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/27/2022; Rotator cuff repair; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 5/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/24/2022; SHOULDER ARTHROSCOPY; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 6/10/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 06/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; 6/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 5/5/2022; ARTHROSCOP ROTATOR CUFF REPR; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 24 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; Shoulder selected as the specific body part; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Shoulder request; ; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Upper Extremity was selected as the first body type/region; Spine/Chest selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; 03/22/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/28/2022; Left distal femoral humor repair; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 2/23/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 03/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Severe impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 04/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 07/20/2021; total hip; Post-Op; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The hip is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/12/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Knee; Hip/Pelvis selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Second Pass Starting; The hip is beign treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; PSFS;NIH-CPI; 70%;64%; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The hip is beign treated.; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes the patient's presentation.; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Mild to moderate impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles, or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Pain Syndrome; Severe impairment in the ability to perform functional tasks due to short, tight or tender pelvic floor muscles or trigger points that cause referred pain best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 04/28/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Non-Surgical; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/04/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Hip/Pelvic; 5/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; The Pelvis/Pelvic Floor is being treated.; The patient has None of the above; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Knee; Lumbar Spine selected as the specific body part; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request; ; Questions about your Lumbar Spine request; ; Neither Pre-Op, Post-Op or Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is Shoulder; Lumbar Spine selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Questions about your Shoulder request; ; The anticipated number of visits is other than 2.; Neither Pre-Op, Post-Op or Non-Surgical; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Upper Extremity selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; FOTO LumbarAssessment; 31%; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; in house tool; Mobility 40%; Fall Risk Screening HIGH; Changing maintaining body positions 50%; Carrying and moving objects 30%; Self Care 60%; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 15 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe functional deficits due to lumbopelvic impairments with or without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 7 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 03/01/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 02/07/2022; S/P L2-S1 FUSION; Post-Op; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/3/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Lower Leg; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 04/07/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request.; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/27/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Fracture selected as the body type/region; Body Part for first pass is Fracture; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; You will now be asked some questions about your fracture request.; Non-surgical upper or lower limb (extremities) best describes the patient's presentation.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Head/Neck was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 4/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Requestor is not a fax; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Head/Neck was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Body Part pass complete; Questions about your Head/Neck request; Three or more visits anticipated; Therapy type is Rehabilitative; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Head/Neck was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Head/Neck; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Shoulder; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request ; Questions about your Head/Neck request;; Neither Pre-Op, Post-Op or Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild or moderate functional deficits due to cervical impairments with distal symptoms best describes the patient's clinical presentation; Head/Neck was selected as the first body type/region; Upper Extremity selected as the second body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; No Second Pass; The requesting provider is other than Physical Therapy or Occupational Therapy; MAHC 10; 75% FUNCTIONALITY; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; No Second Pass; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; At least one of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; One Body Part selected; No Second Pass; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls selected as the body type/region; Body Part for first pass is Gait/Balance; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to cervical impariments with distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; Questions about your Head/Neck request;; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe functional deficits due to cervical impairments with or without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 2/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; quickdash; 61.36/100; Non-Surgical; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits without instability: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical pre; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; 04/06/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 03/11/2022; RTC REPAIR; Post-Op; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Three or more visits anticipated; Therapy type is Rehabilitative; Post-Op; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Upper Extremity selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; 03/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Thoracic Spine/Chest; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Thoracic Spine/Chest request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; One visit anticipated; One visit anticipated; This is not a gold-card auth; Questions about the subsequent request: ; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Requestor is a fax; Physical Therapy; Magellan does not manage chiropractic but does manage speech therapy for the member's plan	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/26/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/6/2022; z47.1; z96.651; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	<p>This is for an Open procedure; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 05/24/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 05/19/2022; ACL reconstruction with bone patellar tendon graft; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	<p>This is for Arthroscopy; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Knee; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/23/2022; Right knee anterior cruciate ligament reconstruction with hamstring autograft; Post-Op; Knee selected as the specific body part; Body Part pass complete; Questions about your Knee request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Post-Op; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested</p>	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; Body Part for second pass is not in options listed; Lumbar Spine selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lumbar Spine request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild or moderate functional deficits due to lumbopelvic impairments without distal symptom best describes the patient's clinical presentation; Spine/Chest was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 04/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lower Leg selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Lower Leg request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Lower Leg; Body Part for second pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Foot/Ankle; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; The anticipated number of visits is other than 2.; Gait, Balance and Falls was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Gait/Balance; Body Part for second pass is Foot/Ankle; Physical Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is Thoracic Spine/Chest; Foot/Ankle selected as the specific body part; Thoracic Spine/Chest selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Thoracic Spine/Chest request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Mild or moderate functional deficits due to thoracic/lumbar impairments without distal symptoms best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Spine/Chest selected as the second body type/region; Body Part for first pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Perform Body Part selection; First Pass; Body Part for first pass is not in options listed; 6/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 2/1/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 11/2021; SURGICAL DEBRIDEMENT AND ACHILLES REPAIR; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; LOWER EXTREMITY FUNCTIONAL INDEX; 17.5% FUNCTIONAL; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 2/8/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 11/16/2021; RIGHT HEEL SPUR REMOVAL;PARTIAL PLANTAR FASCIA REMOVAL; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; LOWER EXTREMITY FUNCTIONAL INDEX; 16% FUNCTIONAL; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request id for the Foot.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 3/9/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 2 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/4/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; 4/14/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/18/2022; S/P LEFT ORIF; Post-Op; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Physical Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; 6/16/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; The requesting provider is other than Physical Therapy or Occupational Therapy; The patient was NOT previously independent with mobility and now requires human assistance and/or an assistive device to walk and/or transfer; None of the following apply; Increase in frequency of falls, Decline in transfers, bed mobility or transitional movements and/or Decline in independence with mobility (walking or wheelchair mobility); Lower Extremity/Hip was selected as the first body type/region; Gait, Balance and Falls was selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Gait/Balance; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; Physical Therapy was requested; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request is for the Ankle.; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip selected as the body type/region; Body Part for first pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	This request is for the Ankle.; This request is for the Ankle.; Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part for second pass is not in options listed; Foot/Ankle selected as the specific body part; Foot/Ankle selected as the specific body part; Body Part pass complete; Questions about your Foot/Ankle request: ; Questions about your Foot/Ankle request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for first pass is Foot/Ankle; Body Part for second pass is Foot/Ankle; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	01/13/2022; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	01/15/2020; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	01/22/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	1/26/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022







4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	6/3/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	6/6/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	06/21/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	6/21/2022; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	08/24/2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	08/31/2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	10/14/2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	10/26/2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	11-09-2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	11/02/2021; No patient history in the past 90 days; Evaluation dates more than 90 days in the past; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	11/04/2021; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	12/8/21; Patient history in the past 90 days; Requestor is not a fax; Occupational Therapy; The evaluation date is not in the future; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Body Part for second pass is Wrist; Hand selected as the specific body part; Wrist selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Questions about your Wrist request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Shoulder; Body Part for second pass is not in options listed; 05/17/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Shoulder selected as the specific body part; Lower Leg selected as the specific body part; Body Part pass complete; Questions about your Lower Leg request: ; Questions about your Shoulder request: ; The anticipated number of visits is other than 2.; Three or more visits anticipated; Therapy type is Rehabilitative; Non-Surgical; The anticipated number of visits is other than 2.; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Severe objective and functional deficits with instability: constant or intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's clinical presentation ; Upper Extremity was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Body Part for second pass is Lower Leg; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Elbow; Wrist selected as the specific body part; Elbow selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; Questions about your Elbow request: ; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; More than 2 Body Parts; 3+ Body Regions was selected - provide details on the top 2; Second Pass Starting; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Occupational Therapy was requested; Previous auth data retrieved, type of habilitation = Rehabilitative; Two visits anticipated; Two visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Elbow; 3/21/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Elbow; 5/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Elbow; 5/20/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Elbow; 5/25/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 4/1/2022; LEFT Elbow Open Flex Deb/Repair; Post-Op; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hand; 4/11/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 2/10/2022; ORIF right small finger proximal phalanx fracture; Post-Op; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; Three or more visits anticipated; Therapy type is Rehabilitative; One Body Part selected; Requestor is not a fax; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Hand; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request; ; One Body Part selected; None of the above best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Shoulder; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Shoulder request: ; Neither Pre-Op, Post-Op or Non-Surgical; One Body Part selected; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 6 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Elbow; Elbow selected as the specific body part; Body Part pass complete; Questions about your Elbow request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild objective and functional deficits: sporadic symptoms with minimal loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; 04/13/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hand; Hand selected as the specific body part; Body Part pass complete; Questions about your Hand request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily task best describes the patient's presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; The Pelvis/Pelvic Floor is being treated.; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is not in options listed; Body Part pass complete; Questions about your Head/Neck request;; 14; Neck Pain Disability Index Questionnaire; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Mild or moderate functional deficits due to cervical impairments without distal symptoms best describes the patient's clinical presentation; Head/Neck selected as the body type/region; Body Part for first pass is Head/Neck; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; 4/5/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Surgical; 3/16/2022; ; Post-Op; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Occupational Therapy; Speech Therapy was not selected; Post-Op or Non-Surgical; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Body Part for second pass is Shoulder; Wrist selected as the specific body part; Shoulder selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; Questions about your Shoulder request; ; The anticipated number of visits is other than 2.; Neither Pre-Op, Post-Op or Non-Surgical; Two Body Parts selected; Second Pass Starting; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity was selected as the first body type/region; Upper Extremity selected as the second body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request; ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request; ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 4 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Physical Medicine	Disapproval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Wrist; Wrist selected as the specific body part; Body Part pass complete; Questions about your Wrist request: ; The anticipated number of visits is other than 2.; One Body Part selected; No Second Pass; Severe objective and functional deficits: constant intense symptoms with severe loss of range of motion, strength, or ability to perform daily tasks best describes the patient presentation; Upper Extremity selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Plastic Surgery	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for pre-operative evaluation.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Plastic Surgery	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Plastic Surgery	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The study is being ordered as a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Plastic Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This is a request for an Internal Auditory Canal MRI.; There is a suspected Acoustic Neuroma or tumor of the inner or middle ear.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Plastic Surgery	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Plastic Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a request for a foot CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a request for a foot CT.; The patient has used a cane or crutches for greater than four weeks.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is not a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a request for an Ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73700 Computed tomography, lower extremity; without contrast material		This is a request for an ankle CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	"There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle.; There is a history of new onset of severe pain in the ankle within the last two weeks.; The patient does not have an abnormal plain film study of the ankle other than arthritis.; The patient has not used a cane or crutches for greater than four weeks.; There is not a suspected tarsal coalition.; The patient has not been treated with and failed a course of supervised physical therapy.; The patient has been treated with anti-inflammatory medications in conjunction with this complaint.; The patient does not have a documented limitation of their range of motion.; patient has BILATERAL pain unresponsive to injections, oral steroids, orthotics and splints for past 8 months; This is a request for a bilateral ankle MRI.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are NO physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; It is not known if surgery is planned for in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is not planned for in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a known palpated mass.; This study is NOT being ordered for evaluation of Morton's Neuroma.; It is unknown if surgery, fine needle aspirate or a biopsy is planned in the next 30 days.; A biopsy has NOT been completed.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a post op.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a pre op.; Surgery is not planned for within 30 days.; This study is NOT being ordered for assessment of a known fracture fragment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a pre op.; Surgery is planned for within 30 days.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for known dislocation.; The dislocation is NOT reducible.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with a protective boot for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for tendonitis.; The patient has had foot pain for over 4 weeks.; The patient has been treated with a protective boot for at least 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is NOT being ordered for chronic pain, acute pain, rule our tarsal coalition, known or suspected septic arthritis or osseomyelitis, tendonitis, neuroma or plantar fasciitis.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is not being ordered for foot pain, known dislocation, infection, suspected fracture, known fracture, pre op, post op or a known/palpated mass.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The member has a recent injury.	Apr-Jun 6 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The member has surgery planned.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for a mass, tumor or cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for post operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	PERONEAL TENDON RUPTURE LEFT; This study is being ordered for trauma or injury.; ; There has been treatment or conservative therapy.; LEFT ANKLE PAIN. MODERATE TO SEVERE PAIN; PLACED AN INJECTION TO THE PARANEAL TENDON SHEATH AT THE LEFT LATERAL MALLEOLLUS CONSISTING OF 1 CC OF 2% LIDOCAINE PLAIN, 1 CC OF DEXAMETHASONE SODIUM PHOSPHATE, AND 1 CC OF KENALOG 10. I STARTED HER ON DICLOFENC 75 MG TWICE DAILY X1 MONTH.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	SEE CLINICALS; This study is being ordered for trauma or injury.; OCTOBER 2020; There has been treatment or conservative therapy.; PAIN; SEE CLINICALS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is not planned for in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for a known palpated mass.; This study is NOT being ordered for evaluation of Morton's Neuroma.; A biopsy is planned in the next 30 days.; A biopsy has NOT been completed.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a walking cast for at least 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with crutches for at least 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for plantar fasciitis.; The patient has had foot pain for over 4 weeks.; The patient has been treated with a walking cast for at least 6 weeks.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is not being ordered for foot pain, known dislocation, infection,suspected fracture, known fracture, pre op, post op or a known/palpated mass.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is not requested for any of the standard indications for Knee MRI	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Podiatry	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Preventive Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Psychiatry	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Psychiatry	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Psychiatry	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Psychiatry	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was Rhythm abnormalities	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for sinusitis.; It is unknown if the patient is immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; This reason this study is being requested is unknown.; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; This study is being requested for 'none of the above'.; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; This study is being requested for an unresolved cough; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This study is being requested for suspicion of pulmonary embolism (PE); This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	"There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is radiologic evidence of a lung abscess or empyema.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; It is unknown if the patient had a Chest x-ray in the past 2 weeks.; This study is being ordered for hemoptysis.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient had a Chest x-ray in the past 2 weeks.; This study is being ordered for hemoptysis.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	12 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has been completed; Ths Interstitial Lung Disease is suspected; The chest x-ray was abnormal	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has been completed; Ths Interstitial Lung Disease is suspected; The chest x-ray was normal; A PFT (Pulmonary Function Test) has been completed that shows restrictive lung disease	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has been completed; Ths Interstitial Lung Disease is suspected; The chest x-ray was normal; A PFT (Pulmonary Function Test) has NOT been completed that shows restrictive lung disease	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has NOT been completed; Ths Interstitial Lung Disease is suspected	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; The Interstitial Lung Disease is known	14 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	12 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	8 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	9 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	7 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; It is unknown if there is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	10 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	17 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	50 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; This is a request for a Chest CT.; This study is being requested for Screening of Lung Cancer.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient quit smoking in the past 15 years.; The patient has signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; This study is being requested for an unresolved cough; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	EVAL FOR SOB, AND PARALYZED HEMIDIAPHRAGM. COMPLICATED CARADIAIC HX PT HAS PACEMAKER AND NOW HAS A LEADLESS PACEMAKER IN PLACE, PT HAD LEFT ROBOTIC THORACOTOMY TO ATTEMPT LEFT ATRIAL APPENDAGE LIGATION. PT HAS PERICARADIAL EFFUSION. . ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; EVAL OF CHEST AND NECK FOR MECHANICAL CAUSES OF PARALYZED HEMIDIAPHRAGM; It is not known if there has been any treatment or conservative therapy.; PARALYZED HEMIDIAPHRAGM, OSA, DYSPNEA, PERMANENT ATRIAL FIBRILLATION, RESTRICTIVE LUNG DISEASE, ELEVATED LEFT HEMIDIAPHRGM, UPPER EXTREMITY DVT, SIGNIFICANT PFT RESTRICTIVE AND PERIPHERAL EDEMA.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	fax it; "There is NO evidence of a lung, mediastinal or chest mass noted within the last 30 days.;" A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	It is not known if there is radiologic evidence of asbestosis.; "The caller doesn't know if there is radiologic evidence of sarcoidosis, tuberculosis or fungal infection.;" It is not known if there is radiologic evidence of a lung abscess or empyema.; It is not known if there is radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; It is unknown if there is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	It is unknown if they had a previous Chest x-ray; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	Pre-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	The patient is presenting new signs or symptoms.; "There is radiologic evidence of sarcoidosis, tuberculosis or fungal infection.;" There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection.;" There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; It is unknown if there is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection.;" There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	There is no radiologic evidence of asbestosis.; There is a known inflammatory disease.; There is not a known tumor.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; The patient is NOT having an operation on the chest or lungs.; This study is being ordered for a pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	There is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 12 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71250	Computed tomography, thorax; without contrast material	This is a request for a Thorax (Chest) CT.; Abnormal finding on examination of the chest, chest wall and/or lungs describes the reason for this request.; Yes this is a request for a Diagnostic CT ; This request is for a Low Dose CT for Lung Cancer Screening.; It is unknown if this patient has had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Enter answer here - or Type In Unknown if No Info Given. This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; It is unknown if the patient is presenting with pulmonary signs or symptoms of lung cancer or if there are other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 25 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 26 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 27 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 19 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Caughing up blood; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	shortness of breath, history of pulmonary embolism, ground glass opacity present on imaging of lung.; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	71215 Computed tomography, cervical spine; without contrast material	EVAL FOR SOB, AND PARALYZED HEMIDIAPHRAGM. COMPLICATED CARADIA HX PT HAS PACEMAKER AND NOW HAS A LEADLESS PACEMAKER IN PLACE, PT HAD LEFT ROBOTIC THORACOTOMY TO ATTEMPT LEFT ATRIAL APPENDAGE LIGATION. PT HAS PERICARDIAL EFFUSION. . ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; EVAL OF CHEST AND NECK FOR MECHANICAL CAUSES OF PARALYZED HEMIDIAPHRAGM; It is not known if there has been any treatment or conservative therapy.; PARALYZED HEMIDIAPHRAGM, OSA, DYSPNEA, PERMANENT ATRIAL FIBRILLATION, RESTRICTIVE LUNG DISEASE, ELEVATED LEFT HEMIDIAPHRGM, UPPER EXTREMITY DVT, SIGNIFICANT PFT RESTRICTIVE AND PERIPHERAL EDEMA.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	unknown; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	metabolically active 1.0 cm lytic lesion of posterior rt iliac likely metastic seen on pet scan on 3.25.2022 abdn pelvis shows mild intrahepatic duct dilation in setting of previous cholecystectomy. ;;pt has a active 2.2 cm solid mass in rt middle lobe; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78813 Positron emission tomography (PET) imaging; whole body	This nodule is New (recently diagnosed); The nodule is NOT calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; The nodule is Between 8 mm AND 4cm; The patient has NOT had a prior PET Scan for this nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with 18F-Fluciclovine (Axumin)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; A biopsy has NOT substantiated the cancer type; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is not being ordered for Cervical CA, Brain Cancer/Tumor or Mass, Thyroid CA or other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is Existing (stable, being followed with any modality); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is New (recently diagnosed); It is unknown if the nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is New (recently diagnosed); The nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Follow-up to a prior test; EKG has been completed; The EKG was considered abnormal; The abnormality was Rhythm abnormalities	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of heart failure.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient has shortness of breath; Known or suspected Congestive Heart Failure.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an evaluation of new or changing symptoms of valve disease.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	9 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms 6 months or less ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms is unknown; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms was more than 6 months ago.; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed; A Transthoracic Echocardiogram has not been completed.; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	Has been going on for almost 2 months with little progress. Has been aggressively treated.; This study is being ordered for Inflammatory/ Infectious Disease.; 3/23/2022; There has been treatment or conservative therapy.; ; steroids, IV antibiotics, numerous oral antibiotics, updrafts, inhalers, allergy medications, mucinex, cough medications.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	'None of the above' describes the reason for this request.; An abnormal lab finding led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	'None of the above' describes the reason for this request.; This reason this study is being requested is unknown.; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has been completed; Ths Interstitial Lung Disease is suspected; The chest x-ray was abnormal	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has NOT been completed; Ths Interstitial Lung Disease is suspected	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; The Interstitial Lung Disease is known	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has NOT been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	8	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Coughing up blood (hemoptysis) describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Has been going on for almost 2 months with little progress. Has been aggressively treated.; This study is being ordered for Inflammatory/ Infectious Disease.; 3/23/2022; There has been treatment or conservative therapy.; ; steroids, IV antibiotics, numerous oral antibiotics, updrafts, inhalers, allergy medications, mucinex, cough medications.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Post-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Pre-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	They had a previous Chest x-ray; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	CON'T C/O SOB EPISODES WITH CHEST DISCOMFORT; It is not known whether this study is requested to evaluate suspected pulmonary embolus.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study being ordered for new symptoms including hematuria, presenting with known cancer or tumor.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	74181	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; The abnormality found on a previous CT, MRI or Ultrasound was not in the liver, kidney, pancreas or spleen.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This nodule is New (recently diagnosed); It is unknown if the nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This nodule is New (recently diagnosed); The nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This Pet Scan is being requested for Other; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Pulmonary Medicine	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; Follow up for known pulmonary hypertension best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a known brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		There are 2 exams are being ordered.; The ordering MDs specialty is Radiation Oncology	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		There are 3 exams are being ordered.; The ordering MDs specialty is Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)		"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for suspicion of neoplasm, tumor or metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		pt has chronic headache, did the SRS on pt, need 3 month MRI follow up, to make sure no tumor in the body; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; It is not known if there are recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.; There is not a new and sudden onset of headache (less than 1 week) not improved by pain medications.; The tumor is not a pituitary tumor or pituitary adenoma.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		RESTAGING FOR POST RT; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; There are not recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.; There is not a new and sudden onset of headache (less than 1 week) not improved by pain medications.; It is not known if the tumor is a pituitary tumor or pituitary adenoma.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	surveillance after radiation therapy; This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Not requested for evaluation of trauma/injury, tumor, stroke/aneurysm, infection/inflammation,multiple sclerosis, or seizures; The condition is not associated with headache, blurred or double vision or a change in sensation noted on exam.; A metabolic work-up done including urinalysis, electrolytes, and complete blood count with results was not completed.; The patient does NOT have dizziness, fatigue or malaise, Bell's Palsy, a congenital abnormality, loss of smell, hearing loss or vertigo.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; It is unknown if the study is being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has been completed to determine tumor tissue type.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The headache is described as chronic or recurring.; The headache is presenting with a sudden change in severity, associated with exertion, or a mental status change.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has been completed to determine tumor tissue type.	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; Requested for evaluation of tumor; A biopsy has not been completed to determine tumor tissue type.; There are recent neurological symptoms such as one-sided weakness, speech impairments, or vision defects.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Surveillance of a known cancer following treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	Post-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	The ordering MDs specialty is Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	The ordering MDs specialty is Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Radiation Oncology	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	71250 Computed tomography, thorax; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72192 Computed tomography, pelvis; without contrast material	Patient with known lung cancer with left hip pain; The patient is undergoing active treatment for cancer.; This study is being ordered for known tumor, cancer, mass, or rule-out metastasis.; "The ordering physician is NOT an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This study is not being ordered for initial staging.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	BRACHY PLANNING & TX POST XRT; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Endocervical cancer- Pt needs MRI Pelvis following Radiation Therapy to determine HDR Treatment.; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	RADIATION PLANNING; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	stage III squamous cell carcinoma of the cervix, MRI Pelvis needed for planning & treatment for radiation therapy services.; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	There are 2 exams are being ordered.; The ordering MDs specialty is Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; Surgery is planned for within 30 days.; The study is being ordered for Evaluation of the pelvis prior to surgery or laparoscopy.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	TREATMENT AND PLANNING; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in the uterus.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The study is for a mass, tumor or cancer.; The diagnosis of Mass, Tumor, or Cancer has been established.; The study is requested for staging.; This is a request for an elbow MRI; The study is not requested for evaluation of elbow pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture); This is not a pre-operative study for planned surgery.; Non Joint is being requested.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is known tumor.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Ovarian or Esophageal Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Cervical Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Cervical Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lung Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Prostate Cancer.; This PET Scan is being requested for Initial Staging; This is for a PET Scan with PSMA (Pylarify)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This Pet Scan is being requested for Other; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiation Oncology	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary This Pet Scan is being requested for Other; This is for a PET Scan with Dotatate (Gallium GA 68-Dotatate)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	70450 Computed tomography, head or brain; without contrast material	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is not an immediate family history of aneurysm.; The patient has a known aneurysm.; This is a request for a Brain MRA.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74150 Computed tomography, abdomen; without contrast material		This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; This study is ordered for something other than staging of a known tumor (not) prostate, known prostate CA with PSA&gt; 10, abdominal mass, Retroperitoneal mass or new symptoms including hematuria with known CA or tumor.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Will send info if needed.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the abdomen.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for hematuria.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for follow-up.; The patient did NOT have chemotherapy, radiation therapy or surgery in the last 3 months.; They had an Abdomen MRI in the last 10 months.; The patient is NOT presenting new signs or symptoms.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for follow-up.; The patient had chemotherapy, radiation therapy or surgery in the last 3 months.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lymphoma or Myeloma.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		Will send info if needed.; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has not failed a 4 week course of conservative management in the past 3 months.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Radiology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the brain.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT.; This study is being ordered for work-up for suspicious mass.; It is unknown if there is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1 2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does not have any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; There is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Back pain. Arthritic changes at both sacroiliac joints per xray report. HLAB27 positive lab; This study is being ordered for Inflammatory/ Infectious Disease.; 2019; There has been treatment or conservative therapy.; back pain; She is currently on gabapentin. Has taken NSAIDs as well; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI.; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is no weakness or reflex abnormality.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; This case was created via BBI.; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain right hip pt is Claustrophobic; This is a request for a Pelvis MRI; The study is being ordered for pelvic trauma or injury.; This is an evaluation of something other than the pelvic gurdle, sacrum or the tail bone (coccyx).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for osteomyelitis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of pelvic inflammatory disease or abscess.; Yes, this is a preoperative study.; Surgery is not planned for within 30 days.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for Inflammatory/ Infectious Disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is not a history of upper extremity trauma or injury.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is suspicion of upper extremity bone or soft tissue infection.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	mass such as giant cell tumor of the tendon sheath or stenovitis/pannus formation are also considered. The extensor carpi ulnaris tendon is subluxed from the fibro-osseous groove, and the tendon sheath is markedly distended with t2 hyper intense and t1 is; The pain is not from a recent injury, old injury, chronic pain or a mass.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Rheumatoid arthritis with abnormality on xray exam; r/o erosion.; The pain is not from a recent injury, old injury, chronic pain or a mass.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The study is for infection or inflammation.; There are physical exam findings, laboratory results, other imaging including bone scan or ultrasound confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.; This request is for a wrist MRI.; The reason for the study is not for evaluation of wrist pain.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is not taking antibiotics.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested. ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test. ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine; It is not known if the pain began within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has New symptoms of bowel or bladder dysfunction	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Back pain. Arthritic changes at both sacroiliac joints per xray report. HLab27 positive lab; This study is being ordered for Inflammatory/ Infectious Disease.; 2019; There has been treatment or conservative therapy.; back pain; She is currently on gabapentin. Has taken NSAIDs as well; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	continues to complain about her joint arthralgias bilateral knee. Lower back bilateral hips she does have some swelling to bilateral MCP joint; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for tail bone pain or injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	don't see any notes in the system; It is not known if the ordering physician is an orthopedist.; This is a request for a Pelvis MRI.; The study is being ordered for pelvic trauma or injury.; This is an evaluation of the pelvic girdle.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Patient is having a significant amount of lower back and hip pain stiffness 1s thing in the morning. Family HX of psoriasis/psoriatic arthritis. Continue Plaquenil 200 mg bid and start colchicine 0.6 mg bid for anti-inflammatory properties. Evaluation of ; This is a request for a Pelvis MRI.; No, this is not a preoperative study.; The study is being ordered for suspicion of pelvic inflammatory disease or abscess.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	looking for a mass; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; x-ray showed SI Joints of mild osteoarthritis of sacroiliac joints; There has not been any treatment or conservative therapy.; would like to rule sacroiliitis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	will fall over; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; lower hip, movements, stiffness, foot pain and joint tenderness; It is not known if there has been any treatment or conservative therapy.; musculoskeletal pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Inflammatory/ Infectious Disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	looking for a mass; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; x-ray showed SI Joints of mild osteoarthritis of sacroiliac joints; There has not been any treatment or conservative therapy.; would like to rule sacroiliitis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; It is not known if the physician has directed conservative treatment for the past 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Rheumatology	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material		The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences		The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		Positive impingement in the Neer and Hawkins positions, With passive extension, mild tenderness to palpation of the rotator cuff tendons, subacromial or subdeltoid bursa is appreciated, exam consistent with weakness primarily testing supraspinatus with i; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; January 2022; There has been treatment or conservative therapy.; Left shoulder pain; Home exercise program and formal physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The pain is from a recent injury.; Surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)		The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; ; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Effusion with blood (Hemarthrosis) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material		This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Sports Medicine	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	Positive impingement in the Neer and Hawkins positions, With passive extension, mild tenderness to palpation of the rotator cuff tendons, subacromial or subdeltoid bursa is appreciated, exam consistent with weakness primarily testing supraspinatus with i; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; January 2022; There has been treatment or conservative therapy.; Left shoulder pain; Home exercise program and formal physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; 'None of the above' best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump; The size of the neck mass is unknown.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The study is being ordered as a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the Neck.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material		; A Chest/Thorax CT is being ordered.; The study is being ordered for none of the above.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material		; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; 'None of the above' are related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material		03/10/2022; There has been treatment or conservative therapy.; Caugh weight lost abdominal and chest pain; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material		04/22/2022; There has not been any treatment or conservative therapy.; routine health maintenance exam; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material	06/13/2022; There has not been any treatment or conservative therapy.; having rectal pain and bleeding for about 2-3 months; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material	Rectal cancer, staging; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71250 Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	This study is being ordered for a known tumor.; The ordering physician is an oncologist, surgeon, pulmonologist, or cardiologist.; The patient is presenting new symptoms.; This study is being ordered for follow-up.; The patient is not undergoing active treatment for cancer.; This is a request for a chest MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72125 Computed tomography, cervical spine; without contrast material	This study is to be part of a Myelogram.; This is a request for a Cervical Spine CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72128 Computed tomography, thoracic spine; without contrast material	This is a request for a thoracic spine CT.; The study is being ordered due to Neurological deficits.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting abnormal gait.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	degenerative disc disease; 2/1/2022; There has been treatment or conservative therapy.; low back pain, cervical spine pain and right leg pain.; medication management; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	degenerative disc disease; 2/1/2022; There has been treatment or conservative therapy.; low back pain, cervical spine pain and right leg pain.; medication management; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered due to organ enlargement.; There is ultrasound or plain film evidence of a pelvic organ enlargement.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; Yes, this is a preoperative study.; Surgery is planned for within 30 days.; The study is being ordered for suspicion of pelvic inflammatory disease or abscess.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is from an old injury.; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a preoperative or recent postoperative evaluation.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; It is not known if surgery is planned for in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is not taking antibiotics.; This is not a study for a fracture which does not show healing (non-union fracture).; This is not a pre-operative study for planned surgery.; Non Joint is being requested.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for post-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of an Abscess of the upper abdominal area.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	03/10/2022; There has been treatment or conservative therapy.; Caught weight lost abdominal and chest pain; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	04/22/2022; There has not been any treatment or conservative therapy.; routine health maintenance exam; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	06/13/2022; There has not been any treatment or conservative therapy.; having rectal pain and bleeding for about 2-3 months; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Rectal cancer, staging; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for ketones.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were normal.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; It is not known if the patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); mass of abdomen; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is organ enlargement.; There is not ultrasound or plain film evidence of an abdominal organ enlargement.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun





4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for organ enlargement.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for pre-operative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; The abnormality found on a previous CT, MRI or Ultrasound was not in the liver, kidney, pancreas or spleen.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is not being ordered for known tumor, suspicious mass or suspected tumor/metastasis, organ enlargement, known or suspected vascular disease, hematuria, follow-up trauma, or a pre-operative evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	The patient has a history of ovarian cancer. Her maternal grandmother had breast cancer twice.; This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are NOT benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	The Patient has new Breast Cancer; This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are NOT benign lesions in the breast associated with an increased cancer risk.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; Yes, the patient have a known mutation such as BRCA1, BRCA2, PTEN or TP53.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There are benign lesions in the breast associated with an increased cancer risk.; There is NOT a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; No, this is not an individual who has known breast cancer in the contralateral (other) breast.; Yes, this is a confirmed breast cancer.; Yes, the results of this MRI (size and shape of tumor) affect the patient's further management.	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; Yes, this is an individual who has known breast cancer in the contralateral (other) breast.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a suspected implant rupture.; Yes, this study is being ordered to evaluate a suspected silicone implant rupture.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are benign lesions in the breast associated with an increased cancer risk.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Unknown; This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are NOT benign lesions in the breast associated with an increased cancer risk.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is not being ordered for None of the above.; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Surgery	Approval	58037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		White County Medical Center does not provide a ERCP and with this patient having intra-abdominal fluid collection that is increasing plus gallstones, a MRCP is our next option.; This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has not undergone an unsuccessful ERCP.; The patient does not have an altered biliary tract anatomy that precludes ERCP.; It is not known if patient requires evaluation for a congenital defect of the pancreatic or biliary tract.; It is not known if MRCP will be used to identify a pancreatic or biliary system obstruction that cannot be opened by ERCP.; It is not known if patient is an infant or young child, and not an adult who is debilitated or uncooperative in such a manner that ERCP is unsafe or cannot be performed.; "The patient has neither a documented allergy to iodine-based contrast materials, or a general history of allergic responses."; It is not known if patient has acute pancreatitis.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is being ordered for Congenital Anomaly; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	would like to injections; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/2021; There has been treatment or conservative therapy.; lumbar back pain ;Thoracic back pain; Medication;Home exercises;Physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	Mandible Min 4V - Xray of Jaw on 3/10/22 shows some degenerative facet changes in the cervical spine. Consider further evaluation with CT.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; There is no reason why the patient cannot have a Cervical Spine MRI.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	worsening back pain; 5/7/2018; There has been treatment or conservative therapy.; back pain; PT-lifestyle adjustment- medication-; This study is being ordered for Other	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	worsening back pain; 5/7/2018; There has been treatment or conservative therapy.; back pain; PT-lifestyle adjustment- medication-; This study is being ordered for Other	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	would like to injections; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 12/2021; There has been treatment or conservative therapy.; lumbar back pain ;Thoracic back pain; Medication;Home exercises;Physical therapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The patient has significant ulnar-sided elbow pain. I recommended an MRI to evaluate his ulnar collateral ligament. Hopefully this is just a strain and not a tear of his reconstructed ligament.; The pain is from a recent injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 6 months ago; There has been treatment or conservative therapy.; patient having trouble lifting, does physical labor for work; steroid injections.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Effusion with blood (Hemarthrosis) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for post-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is being ordered for Congenital Anomaly; The ordering MDs specialty is something other than Cardiology, Thoracic Surgery or Vascular Surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 10 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is follow up trauma.; There is not laboratory or physical evidence of an intra-abdominal bleed.; There is not physical or abnormal blood work consistent with peritonitis or abdominal abscess.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); diastasis; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Fecal incontinence with recurrent prolapse, appears rectovaginal as opposed to isolated rectal prolapse. Will work up with CT ab/pelvis to r/o intraabdominal pathology or lead point.; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); possible hernia; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is organ enlargement.; There is not ultrasound or plain film evidence of an abdominal organ enlargement.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam are unknown.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for known or suspected infection.; There are physical findings or abnormal blood work consistent with pancreatitis.; A lipase abnormality was noted.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdominal arteries.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Radiology Services Denied Not Medically Necessary	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; Yes, this is an individual who has known breast cancer in the contralateral (other) breast.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; It is unknown if there been a change in clinical status since the last echocardiogram.; This is NOT for the initial evaluation of heart failure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgery	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; 'None of the above' best describes the patient's tumor.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for a known or suspected tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		There are 2 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		There are 3 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70490 Computed tomography, soft tissue neck; without contrast material		This is a request for neck soft tissue CT.; The study is being ordered as a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		There are 2 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the last 12 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the past 10 months.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; Abnormal mass in the chest, chest wall, or lung is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; Initial staging prior to treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material		Pre-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material		The ordering MDs specialty is Surgical Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material		The ordering MDs specialty is Surgical Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material		The ordering MDs specialty is Surgical Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material	They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71250 Computed tomography, thorax; without contrast material	This is a request for a Thorax (Chest) CT.; Pre-operative evaluation describes the reason for this request.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Neoplasm colorectal ; colon mass; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	rectocele; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences					Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	There are 2 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Surgical Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Known diagnosis of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Surgical Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for Staging or Restaging of Cancer, Metastatic disease, Malignancy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	The ordering MDs specialty is Surgical Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested to Establish a diagnosis of Cancer, Metastatic disease, Malignancy	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; Yes, the patient have a known mutation such as BRCA1, BRCA2, PTEN or TP53.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; No, this is not an individual who has known breast cancer in the contralateral (other) breast.; Yes, this is a confirmed breast cancer.; Yes, the results of this MRI (size and shape of tumor) affect the patient's further management.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; Yes, this is an individual who has known breast cancer in the contralateral (other) breast.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral		This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are benign lesions in the breast associated with an increased cancer risk.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	78813 Positron emission tomography (PET) imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		There are 2 exams are being ordered.; The ordering MDs specialty is Surgical Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Breast Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the axillary lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Surgical Oncology	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		There are 2 exams are being ordered.; The ordering MDs specialty is Thoracic Surgery	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing		There are 2 exams are being ordered.; The ordering MDs specialty is Thoracic Surgery	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71250 Computed tomography, thorax; without contrast material		Patient has Severe Aortic Valve Stenosis and is being set up for surgery. We are needing this test for Pre Op AVR, Aortic Valve Stenosis; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is Thoracic Surgery; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for None of the above;	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71250 Computed tomography, thorax; without contrast material		Post-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71250 Computed tomography, thorax; without contrast material		Surgery is scheduled within the next 30 days.; A Chest/Thorax CT is being ordered.; The patient is having an operation on the chest or lungs.; This study is being ordered for a pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing		Assessment: ;1. Aortic valve insufficiency, etiology of cardiac valve disease unspecified - I35.1 (Primary) ;2. Abnormal echocardiogram - R93.1.; This study is not requested to evaluate suspected pulmonary embolus.; This study will be performed in conjunction with a Chest CT.; Yes, this is a request for a Chest CT Angiography.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing		This is a follow-up for an Ascending Aortic Aneurysm. Patient also has Left Atrial dilation and diastolic dysfunction; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for another reason besides Known or Suspected Congenital Abnormality, Known or suspected Vascular Disease.; Yes, this is a request for a Chest CT Angiography.	1	2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing		This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences		This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture); This is not a pre-operative study for planned surgery.; Non Joint is being requested.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing		This is a request for CT Angiography of the Abdomen and Pelvis.	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing		There are 2 exams are being ordered.; The ordering MDs specialty is Thoracic Surgery	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		Patient has Severe Aortic Valve Stenosis and is being set up for surgery. We are needing this test for Pre Op AVR, Aortic Valve Stenosis; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is Thoracic Surgery; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This is being requested for None of the above; This study is being ordered for Vascular Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material		This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing		There are 2 exams are being ordered.; The ordering MDs specialty is Thoracic Surgery	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the abdominal arteries.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Embolism.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of suspected valve disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has NOT been examined twice at least 30 days apart.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease; The ordering MDs specialty is Thoracic Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This is a request for CT Angiography of the Abdomen and Pelvis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This study is being ordered for Vascular Disease; The ordering MDs specialty is Thoracic Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is Thoracic Surgery; This study is being ordered for none of the above or don't know.; This study is being ordered for evaluation of the aorta or major veins arteries related to the heart.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Thoracic Surgery	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for a history of heart valve disease.; Mild stenosis or mild regurgitation of the mitral or aortic valve is present; This is NOT a initial evaluation after aortic or mitral valve surgery.; It has been more than 3 years since the last Transthoracic Echocardiogram (TTE) was completed; The patient is NOT asymptomatic	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; 'None of the above' describes the headache's character.; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is on anticoagulation or blood thinner treatments	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a headache involving the back of the head and the patient is over 55 years old; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a known tumor outside the brain.; Known or suspected tumor best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has a suspected brain tumor.; There are documented neurologic findings suggesting a primary brain tumor.; This is NOT a Medicare member.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; The patient has the worst headache of patient's life with onset in the past 5 days; This is NOT a Medicare member.; Headache best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected infection best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70450 Computed tomography, head or brain; without contrast material		This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is not suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; "There is not a history of serious head or skull, trauma or injury.ostct"; "There is not suspicion of neoplasm, or metastasis.ostct"; This is not a preoperative or recent postoperative evaluation.; "There is not suspicion of acoustic neuroma, pituitary or other tumor. ostct"	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit,sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70486 Computed tomography, maxillofacial area; without contrast material		"This request is for face, jaw, mandible CT.239.8"; "There is a history of serious facial bone or skull, trauma or injury.fct"; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70486 Computed tomography, maxillofacial area; without contrast material		RESTAGING SCANS-PRE OP; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for follow-up to trauma.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70486 Computed tomography, maxillofacial area; without contrast material		This is a request for a Sinus CT.; This study is being ordered for sinusitis; The patient is immune-compromised.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as (sudden onset of 2 or more symptoms of nasal discharge, blockage or congestion, facial pain, pressure and reduction or loss of sense of smell, which are less than 12 wks in duration); It has been 14 or more days since onset AND the patient failed a course of antibiotic treatment; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70486 Computed tomography, maxillofacial area; without contrast material	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immune-compromised.; The patient's current rhinosinusitis symptoms are described as Recurrent Acute Rhinosinusitis (4 or more acute episodes per year); Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	History of Malignant thymoma; evaluation of disease and weight loss.; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	RESTAGING SCANS-PRE OP; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a known tumor or metastasis in the neck.; Yes this is a request for a Diagnostic CT	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is 1 cm or smaller.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The neck mass is larger than 1 cm.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is a palpable neck mass or lump.; The size of the neck mass is unknown.; The neck mass has been examined twice at least 30 days apart.; The lump did not get smaller.; A fine needle aspirate was NOT done.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70490 Computed tomography, soft tissue neck; without contrast material	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abscess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	He is gun shot wound to left jaw. He needs a follow up CTA to make sure repair is maintained.; This study is being ordered for trauma or injury.; 03/28/22; There has been treatment or conservative therapy.; He is a gun shot wound to face and left jaw.; Consultation with Vascular Surgery . Also had a CTA of head and neck and Duplux of carotid artery left. We need another CTA to make sure that the repair of injury has maintained.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Some mild intimal thickening with peak systolic velocity right ;internal carotid artery in the 50-69% range although may simply relate ;to tortuous vessels.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 63 y.o. Caucasian female is here today for follow up for diabetes, hypertension, pulmonary hypertension, mitral and tricuspid regurgitation, hypercholesterolemia, CVD with history of stroke, atrial fibrillation. The patient has episodes of precordial ches; It is not known if there has been any treatment or conservative therapy.; Some mild intimal thickening with peak systolic velocity right ;internal carotid artery in the 50-69% range although may simply relate ;to tortuous vessels.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the brain.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	He is gun shot wound to left jaw. He needs a follow up CTA to make sure repair is maintained.; This study is being ordered for trauma or injury.; 03/28/22; There has been treatment or conservative therapy.; He is a gun shot wound to face and left jaw.; Consultation with Vascular Surgery . Also had a CTA of head and neck and Duplux of carotid artery left. We need another CTA to make sure that the repair of injury has maintained.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Some mild intimal thickening with peak systolic velocity right ;internal carotid artery in the 50-69% range although may simply relate ;to tortuous vessels.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 63 y.o. Caucasian female is here today for follow up for diabetes, hypertension, pulmonary hypertension, mitral and tricuspid regurgitation, hypercholesterolemia, CVD with history of stroke, atrial fibrillation. The patient has episodes of precordial ches; It is not known if there has been any treatment or conservative therapy.; Some mild intimal thickening with peak systolic velocity right ;internal carotid artery in the 50-69% range although may simply relate ;to tortuous vessels.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the Neck.	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	"This is a request for orbit,face, or neck soft tissue MRI.239.8"; The study is ordered for pre-operative evaluation	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	RESTAGING OF MALIGNANT OF HEAD,NECK AND FACE; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	There is a suspicion of an infection or abscess.; This is a request for an Orbit MRI.; There is not a history of orbit or face trauma or injury.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	This is a request for an Orbit MRI.; There is a history of orbit or face trauma or injury. Location: orbital (left side);Quality: throbbing; tightness; pain; piercing/stabbing (lancinating); squeezing;Severity: severe; pain level 8/10 (when it is the most intense.); pain is only with exertion;Duration: started: (2 weeks); There is not an immediate family history of aneurysm.; The patient does not have a known aneurysm.; The patient has not had a recent MRI or CT for these symptoms.; There has not been a stroke or TIA within the past two weeks.; This is a request for a Brain MRA.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70544 Magnetic resonance angiography, head; without contrast material(s)	There is an immediate family history of aneurysm.; This is a request for a Brain MRA.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	03/07/2022; There has been treatment or conservative therapy.; Benign neoplasm of meninges, unspecified Migraine w/o aura, not intractable, with status migrainosus; PHYSICAL THERAPY,NSAIDS, ORAL STEROIDS, BRACING, IMMOBILIZATION; This study is being ordered for Neurological Disorder	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Approximately 1 year ago; There has been treatment or conservative therapy.; ; Gabapentin 100mg BID; This study is being ordered for Neurological Disorder	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; This study is being ordered for Trauma / Injury	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This is a request for an Internal Auditory Canal MRI.; There is a suspected Acoustic Neuroma or tumor of the inner or middle ear.	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; Known or suspected TIA (stroke) best describes the reason that I have requested this test.; There are documented localizing neurologic findings.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient does not have dizziness, one sided arm or leg weakness, the inability to speak, or vision changes.; The patient does not have HIV or cancer.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient had a thunderclap headache or worst headache of the patient's life (within the last 3 months).	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 24 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	Apr-Jun 25 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a sudden and severe headache.; The patient has NOT had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has dizziness.; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has vision changes; The patient has a sudden and severe headache.; The patient had a recent onset (within the last 3 months) of neurologic symptoms.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.; The patient has NOT had a Brain MRI in the last 6 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown if the patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.; The patient has NOT had a Brain MRI in the last 12 months	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a congenital abnormality.; The patient has Big head (Macrocephaly).	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient had a memory assessment for cognitive impairment completed; The patient has normal results of B12, TSH and other metabolic labs	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Memory Loss.; This is a new/initial evaluation; The patient has had a completed memory assessment (like MMSE, MoCA, or Slums) showing mild cognitive impairment; The patient had labs completed, including B12, TSH (Thyroid-stimulating hormone), CBC (Complete Blood Count), and CMP (Comprehensive Metabolic Panel)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient does NOT have a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has dizziness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for Multiple Sclerosis.; The patient has new symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for stroke or TIA (transient ischemic attack).	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient has one sided arm or leg weakness.; The patient had a recent onset (within the last 4 weeks) of neurologic symptoms.; This study is being ordered for trauma or injury.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for and infection or inflammation.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the last 12 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is not presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.; The last Brain MRI was performed within the past 10 months.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for follow-up.; The patient is presenting new symptoms.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; This study is being ordered for a tumor.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for Multiple Sclerosis.; It is unknown why this study is being ordered.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for seizures.; There has been a change in seizure pattern or a new seizure.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for staging.; This study is being ordered for a tumor. ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250 Computed tomography, thorax; without contrast material	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250 Computed tomography, thorax; without contrast material	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250 Computed tomography, thorax; without contrast material	; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250 Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; 'None of the above' were relevant in the diagnosis or suspicion of inflammatory lung disease; This study is being requested for known or suspected inflammatory disease such as sarcoidosis, pneumoconiosis, asbestosis, silicosis; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Abnormal finding on physical examination was relevant in the diagnosis or suspicion of inflammatory lung disease; This study is being requested for known or suspected inflammatory disease such as sarcoidosis, pneumoconiosis, asbestosis, silicosis; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; An abnormal finding on physical examination led to the suspicion of infection.; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; An abnormal imaging (xray) finding led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Another abnormality led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; Restaging during ongoing treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	'None of the above' describes the reason for this request.; This study is being requested for an unresolved cough; This is a request for a Chest CT.; This study is being requested for none of the above.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	01/24/2022; There has been treatment or conservative therapy.; THROMBOCYTOPENIA, GERD,IBS, NEAUSEA AND VOMITING, RASH; FOLFOX q 2 weeks from 3/2/22;MVASI added from 3/16/22; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	01/29/2020; There has been treatment or conservative therapy.; AXIETY AND DEPRESSION; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	2/7/2022; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	02/11/2022; There has been treatment or conservative therapy.; hot flashes and night sweats that are causing a rash on her forehead, upper;back/shoulders and between and around her breasts, occasional fatigue, occasional diarrhea, and nausea; CHEMOTHERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	03-28-2008; There has been treatment or conservative therapy.; Weight loss with diet changes over the past 6 months; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	03/11/2020; There has been treatment or conservative therapy.; NONE; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	03/28/2022; There has not been any treatment or conservative therapy.; ABDOMINAL PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	03/31/2022; There has not been any treatment or conservative therapy.; Terrible pain in the right back down the right leg; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	05/18/2021; There has been treatment or conservative therapy.; unknown; chemo; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	6/14/2022; There has not been any treatment or conservative therapy.; 06/14/22 FNA of R neck mass: High grade/poorly differentiated neuroendocrine carcinoma;05/28/22 CT N: A 3.4cm mass in the R mandibular angle anterior to the sternocleidomastoid, it is difficult to separate form the tail of the parotid and submandibular g; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	06/20/2019; There has been treatment or conservative therapy.; BREAST CANCER, RESPONSE TO TREATMENT; CHEMOTHERAPY AND SURGERY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	7/1/2021; There has been treatment or conservative therapy.; UNKNOWN; HYSTERECTOMY 7/1/2021 ; letrozole 8/2021; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	7/15/2021; There has been treatment or conservative therapy.; ; Pt reports completion of 6 cycles of Carbo/ Taxol on 0125/2022 with Dr. Dorrah; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	08/28/2018; There has been treatment or conservative therapy.; /23/2021: Erin comes in today for follow-up visit. She had a CT scan which looks good. She is excited about her daughter's wedding in August. She has no new symptoms. She is undecided about the COVID-19 vaccine.;3/15/2021: Erin returns today for follow-u; /23/2021: Erin comes in today for follow-up visit. She had a CT scan which looks good. She is excited about her daughter's wedding in August. She has no new symptoms. She is undecided about the COVID-19 vaccine.;3/15/2021: Erin returns today for follow-u; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	09/17/2018; There has been treatment or conservative therapy.; MEG pain and GERD with abnormal radiological finding by CTs 9/11 that showed gb wall thickening.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	09/24/2021; There has been treatment or conservative therapy.; Abdominal pain and flank pain; Neoadjuvant letrozole started 10/29/21.;Verzenio started 12/09/21.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	10/10/2012; There has been treatment or conservative therapy.; ; Ms. Jennie Ewing presents to the clinic for evaluation and management of History of Breast Cancer with new onset back pain. ;She reports that she started having back pain about 4 months ago. She was treated for constipation. About 5 weeks ago she went to; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	11/02/2021; There has been treatment or conservative therapy.; joint ACHES AND PAINS;POLYCYTHEMIA VERA; Skin cancer - squamous cell removed off Right arm -- Feb 2021.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	12/17/2019; There has been treatment or conservative therapy.; WEIGHT LOSS, FATIGUE, GI ISSUES; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	12/30/2020; There has been treatment or conservative therapy.; Anemia of questionable etiology. Suspect she is iron deficient from blood loss; CHEMOTHERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; A chest x-ray has been completed; This Interstitial Lung Disease is suspected; The chest x-ray was normal; A PFT (Pulmonary Function Test) has been completed that shows restrictive lung disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Interstitial Lung disease; The Interstitial Lung Disease is known	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for suspected pulmonary Embolus.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has been completed; The patient has been treated for the cough	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for Unresolved cough; A chest x-ray has NOT been completed	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; It is unknown if there is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	14	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	16	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; Abnormal finding on physical examination was relevant in the diagnosis or suspicion of inflammatory bowel disease; This is a request for a Chest CT.; This study is being requested for known or suspected blood vessel (vascular) disease; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Chest pain describes the reason for this request.; Restaging during ongoing treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is being requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Coughing up blood (hemoptysis) describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	followup exam for breast cancer; There has been treatment or conservative therapy.; breast cancer; radiation ;chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Follow up on pulmonary nodules seen on previous CT incidentally.; "There is NO evidence of a lung, mediastinal or chest mass noted within the last 30 days."; A Chest/Thorax CT is being ordered.; This study is being ordered for work-up for suspicious mass.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	History of Malignant thymoma; evaluation of disease and weight loss.; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	MAMMOGRAM ON 4-26-22 WITH ULTRASOUND SHOWED 2 MASSES IN UPPER OUTER QUADRANT OF BREAST. DOMINANT MASS IS 3.2 CM AND IS SUPEROLATERL TO THIS MASS IS A 1.4 CM DENSITY. BOTH HAVE SPECUALTED MARGINS. ULTRASOUND SHOWS THIS IS 8 CMFN. ON U/S THE LARGER MASS IS ; There has been treatment or conservative therapy.; 2 MASSES IN BREASTS IN THE SIZES STATED EARLIER. BIOPSY NO 5-6-22 SHOWED IDC, G2, ER/PR (+), Her 2 (-) FOR BOTH. fOCAL ASSOCIATED LOW TO INTERMEDIATE GRADE DCIS.; MAMMOGRAM, U/S AND BX. SCANS ARE TO EVALUATE EXTENT OF DISEASE.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	metastatic renal cell carcinoma; There has been treatment or conservative therapy.; metastatic renal cell carcinoma; chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Neoplasm: colorectal ;rectal cancer; There has been treatment or conservative therapy.; Neoplasm: colorectal ;rectal cancer; radiation;chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Pre-operative evaluation describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	suspected thymus tumor; A Chest/Thorax CT is being ordered.; The study is being ordered for none of the above.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	The patient is presenting new signs or symptoms.; "There is radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; It is unknown if there is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	There is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known or suspected inflammatory disease or pneumonia.	9	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	They had a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	21	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	This is a request for a Thorax (Chest) CT.; Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	This is a request for a Thorax (Chest) CT.; Abnormal imaging test describes the reason for this request.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71250	Computed tomography, thorax; without contrast material	Unexplained weight loss describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	Apr-Jun 2022



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	- Chronic obstructive pulmonary disease, unspecified COPD type; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This request is for a Low Dose CT for Lung Cancer Screening.; It is unknown if this patient has had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; It is unknown if the patient is presenting with pulmonary signs or symptoms of lung cancer or if there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Panlobular emphysema (HCC); This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Stage 3 severe COPD by GOLD classification ;Nicotine use ;Tobacco use disorder; This request is for a Low Dose CT for Lung Cancer Screening.; No, I do not want to request a Chest CT instead of a Low Dose CT for Lung Cancer Screening.; The patient is presenting with pulmonary signs or symptoms of lung cancer or there are other diagnostic test suggestive of lung cancer.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 27 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 28 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	; It is not known whether this study is requested to evaluate suspected pulmonary embolus.; This study is being ordered for Known Vascular Disease.; This is a pre-operative evaluation.; This surgery is scheduled/planned.; It is not known whether a catheter angiogram has been performed within the last month.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 1/2/2018; It is not known if there has been any treatment or conservative therapy.; chest pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Prior imaging indicates thoracic aorta is ectatic.; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Suspected Vascular Disease.; There are new signs or symptoms indicative of a dissecting aortic aneurysm.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	The ordering provider is requesting this follow up as patient was newly diagnosed in 08/2021; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a Follow-up to a previous angiogram or MR angiogram.; There are no new signs or symptoms indicative of a dissecting aortic aneurysm.; There are no signs or symptoms indicative of a progressive vascular stenosis.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 10 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is requested to evaluate suspected pulmonary embolus.; Yes, this is a request for a Chest CT Angiography.	Apr-Jun 11 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72125 Computed tomography, cervical spine; without contrast material	It is not known if the patient has any neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There has been a supervised trial of conservative management for at least 6 weeks.; The patient is experiencing sensory abnormalities such as numbness or tingling.; There is a reason why the patient cannot have a Cervical Spine MRI.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Abnormal gait.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72125 Computed tomography, cervical spine; without contrast material	The patient does have neurological deficits.; This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to chronic neck pain or suspected degenerative disease.; There is a reason why the patient cannot have a Cervical Spine MRI.; The patient is experiencing or presenting symptoms of Asymmetric reflexes.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72128 Computed tomography, thoracic spine; without contrast material	The patient does have neurological deficits.; This is a request for a thoracic spine CT.; The study is being ordered due to trauma or acute injury within 72 hours.; There is a reason why the patient cannot undergo a thoracic spine MRI.; The patient is experiencing or presenting abnormal gait.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72131 Computed tomography, lumbar spine; without contrast material	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	; dont know; There has been treatment or conservative therapy.; lower back pain, neck pain, chronic back pain; Physical therapy, home excersies and medication; This study is being ordered for Multiple Sclerosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	03/07/2022; There has been treatment or conservative therapy.; Benign neoplasm of meninges, unspecified Migraine w/o aura, not intractable, with status migrainosus; PHYSICAL THERAPY,NSAIDS, ORAL STERIODS, BRACING, IMMOBILIZATION; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Approximately 1 year ago; There has been treatment or conservative therapy.; ; Gabapentin 100mg BID; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	due to pain and hyperreflexia; 2013; There has been treatment or conservative therapy.; worsening neck and lower back pain with bilateral arm radiation along shoulders and arms through thumb bilaterally. She reports issues with hand function/dexterity.; Physical therapy/ medication; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 03/06/2021; There has been treatment or conservative therapy.; RIGHT SHOULDER PAIN, SWELLING LACKING IN RANGE OF MOTION, NUMBNESS AND TINGLING CROSS SHOULDER AND DOWN TO HAND; HOME THERAPY, NSAIDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Pre operative evaluation; 12/31/2019; There has been treatment or conservative therapy.; Myelopathy; activity modification, over the counter analgesics, opiates, physical therapy and steroid injections; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Prior history of osteomyelitis in lower cervical and upper thoracic region with surgical intervention. Evaluation to determine etiology of spastic walking pattern. Possible progressive myelopathy, spinal stenosis, or spinal instability with spondylolisth; unknown; It is not known if there has been any treatment or conservative therapy.; Spastic walking pattern and decline in walking ability / diminished sensation in lower extremities; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	recommend continuation of current medications, though it is not adequately controlling exacerbation of chronic;pain. I am hoping that proposed interventional therapy will control the pain so we can avoid increasing;medications dose. In my opinion, incre; unknown; There has been treatment or conservative therapy.; MID BACK PAIN, NECK PAIN, MULTIPLE;JOINT PAIN, AND CHRONIC PAIN evaluation and management. She is an established patient. She states that;the pain has not changed significantly since last visit;worse pain is 8/10, at its least it is;7/10, on an averag; -- PATIENT NOTES MEDICATION CHANGE DONE AT LAST APPT IS NOT SUFFICIENT ENOUGH. PATIENT;WAS PREVIOUSLY ON OXYCODONE 20MG BID AND MS ER 15MG BID. PATIENT WAS CHANGED TO;OXYCODONE 10MG TID PRN PAIN. SPOKE WITH DR. KHANZADA AND APPROVED TO CHANGE TO;OXYCODO; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs speciality is NOT Neurological Surgery or Orthopedics	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	see attached clinicals; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; This study is being ordered for Other	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Known or suspected infection or abscess	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Dermatomal sensory changes on physical examination	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is a Medicare member.; The patient has Focal upper extremity weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Abnormal Reflexes	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	4	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; The patient has None of the above	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has Focal upper extremity weakness	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a neurological deficit; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; The pain did NOT begin within the past 6 weeks.; This is NOT a Medicare member.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is a Medicare member.; The patient has New symptoms of paresthesia evaluated by a neurologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a neurological deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for Known tumor with or without metastasis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for None of the above; Pre-operative evaluation describes the reason for requesting this procedure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	This is a request for cervical spine MRI; This procedure is being requested for suspected tumor ; dont know; There has been treatment or conservative therapy.; lower back pain, neck pain, chronic back pain; Physical therapy, home excersies and medication; This study is being ordered for Multiple Sclerosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Prior history of osteomyelitis in lower cervical and upper thoracic region with surgical intervention. Evaluation to determine etiology of spastic walking pattern. Possible progressive myelopathy, spinal stenosis, or spinal instability with spondylolisth; unknown; It is not known if there has been any treatment or conservative therapy.; Spastic walking pattern and decline in walking ability / diminished sensation in lower extremities; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; It is not known if the patient does have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; It is not know if the patient has seen the doctor more then once for these symptoms.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.; Pain is ongoing for years. Pain is constant and sometimes interferes with daily activities. Pain is rated 3/10 at best and 10/10 at worst. Pain is aching and sharp in nature. Numbness is reported to legs. Walking and bending over decreases pain. Sitting,	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has not seen the doctor more then once for these symptoms.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more than once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; The patient has completed 6 weeks of physical therapy?	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Known Tumor with or without metastasis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.; There is weakness.;	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; It is not known if the patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has had back pain for over 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; dont know; There has been treatment or conservative therapy.; lower back pain, neck pain, chronic back pain; Physical therapy, home exercises and medication; This study is being ordered for Multiple Sclerosis	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Pre operative evaluation; 12/31/2019; There has been treatment or conservative therapy.; Myelopathy; activity modification, over the counter analgesics, opiates, physical therapy and steroid injections; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	recommend continuation of current medications, though it is not adequately controlling exacerbation of chronic;pain. I am hoping that proposed interventional therapy will control the pain so we can avoid increasing;medications dose. In my opinion, incre; unknown; There has been treatment or conservative therapy.; MID BACK PAIN, NECK PAIN, MULTIPLE;JOINT PAIN, AND CHRONIC PAIN evaluation and management. She is an established patient. She states that;the pain has not changed significantly since last visit;worse pain is 8/10, at its least it is;7/10, on an averag; -- PATIENT NOTES MEDICATION CHANGE DONE AT LAST APPT IS NOT SUFFICIENT ENOUGH. PATIENT;WAS PREVIOUSLY ON OXYCODONE 20MG BID AND MS ER 15MG BID. PATIENT WAS CHANGED TO;OXYCODONE 10MG TID PRN PAIN. SPOKE WITH DR. KHANZADA AND APPROVED TO CHANGE TO;OXYCODO; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	see attached clinicals; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; This study is being ordered for Other	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; It is unknown if this procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; Something other than listed has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	37	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	38	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	28	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Focal extremity weakness	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Unilateral focal muscle wasting	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via BBI.; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; A Physician supervised home exercise program has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Ice and/or heat has been used for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; Physical therapy has been completed for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has Focal extremity weakness; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Agree; The patient has New symptoms of bowel or bladder dysfunction; This procedure is NOT being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI; This case was created via RadMD.; Cannot agree/affirm; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	UNKNOWN; UNKNOWN; There has been treatment or conservative therapy.; PAIN AND PRESSURE.; PATIENT HAS TAKEN MUSCLE RELAXERS AND PATIENT HAS TRIED PHYSICAL THERAPY.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Worsening neurological symptoms despite PT.; 2/2022; There has been treatment or conservative therapy.; Full body pain. Bilateral thoracic region radiating to behind legs. difficulty laying down. Pain in hips. PT has been difficult. Headaches and blurry vision for last 3 days. Right knee pain with extended walking. Numbness in right foot.; Physical therapy and medications.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered as a follow-up to trauma.; "The ordering physician is a gastroenterologist, urologist, gynecologist, or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for arthritis.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Malignant neoplasm of rectum; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	mass possible on uterus, cyst on ovary mri was suggested as follow up from us pelvis; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A cyst was noted on previous imaging.; An abnormality was found in the ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	PSA of 15.3; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	see attached clinicals; This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; Surgery is planned for within 30 days.; The study is being ordered for Evaluation of the pelvis prior to surgery or laparoscopy.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for osteomyelitis.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is a history of upper extremity joint or long bone trauma or injury.; Yes this is a request for a Diagnostic CT	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	2	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73200 Computed tomography, upper extremity; without contrast material	This is a request for an upper extremity, shoulder, scapula, elbow, hand, or wrist joint CT.; There is not a history of upper extremity joint or long bone trauma or injury.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is not suspicion of upper extremity bone or joint infection.; The ordering physician is not an orthopedist or rheumatologist.; Yes this is a request for a Diagnostic CT	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73206 Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the upper extremity.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	3	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is a preoperative or recent postoperative evaluation.	4	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is an orthopedist.	1	Apr-2022	Jun-2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is a history of upper extremity trauma or injury.	1	Apr-2022	Jun-2022



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is suspicion of upper extremity bone or soft tissue infection.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	concerns for possible intra-articular injury in him to include possible scapholunate ligament injury or TFCC tear.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Dr. Abeler would like to obtain an MRI to evaluate for scapholunate ligament tear. CT images showed to be a dorsal avulsion from the lunate of the scapholunate ligament.; The pain is from a recent injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. The pain is not from a recent injury, old injury, chronic pain or a mass.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for trauma or injury.; 03/06/2021; There has been treatment or conservative therapy.; RIGHT SHOULDER PAIN, SWELLING LACKING IN RANGE OF MOTION, NUMBNESS AND TINGLING CROSS SHOULDER AND DOWN TO HAND; HOME THERAPY, NSAIDS; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	FELL 2 MONTHS AGO, CONTINUED WRIST PAIN, NUMBNESS, SUSPECTED SCAPHOLUNATE LIGAMENT TEAR, HAS WORN A BRACE FOR 2 MONTHS, USED NSAIDS WITHOUT RELIEF; The pain is from a recent injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	no info given; The pain is described as chronic; The member has not failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The pain is described as chronic; The member has failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; ARTHRITIS PAIN RELIEF, ACETAM;traMADol	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has not directed conservative treatment for the past 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has not directed conservative treatment for the past 4 weeks.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	The requested study is a Shoulder MRI.; The study is not requested for shoulder pain.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; The member has a recent injury.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	UNKNOWN; The pain is from an old injury.; The member has not failed a 4 week course of conservative management in the past 3 months.; This request is for a wrist MRI.; This study is requested for evaluation of wrist pain.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is a history of lower extremity joint or long bone trauma or injury.; This is Diagnostic (being used to determine the cause of pain or follow up on prior abnormal imaging)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is not a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for a foot CT.; "There is not a history (within the past six weeks) of significant trauma, dislocation, or injury to the foot."; There is a suspected tarsal coalition.; There is a history of new onset of severe pain in the foot within the last two weeks.; The patient has an abnormal plain film study of the foot other than arthritis.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is a suspected tarsal coalition.; The patient has a documented limitation of their range of motion.; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an Ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	This is a request for an ankle CT.; "There is a history (within the past six weeks) of significant trauma, dislocation, or injury to the ankle."; There is a history of new onset of severe pain in the ankle within the last two weeks.; There is not a suspected tarsal coalition.; Yes this is a request for a Diagnostic CT	Apr-Jun 3 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73700 Computed tomography, lower extremity; without contrast material	This is not a preoperative or recent postoperative evaluation.; There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is suspicion of lower extremity bone or joint infection.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the lower extremity.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	POSSIBLE SURGERY; This study is being ordered for trauma or injury.; PT IS UNSURE OF DATE OF INJURY; There has not been any treatment or conservative therapy.; BURNING, SWELLING, SEVERE PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	see attached clinicals; This study is being ordered for trauma or injury.; see attached clinicals; It is not known if there has been any treatment or conservative therapy.; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being oordered for infection.; There are physical exam findings, laboratory results, other imaging including bone scan or plain film confirming infection, inflammation and or aseptic necrosis.; Surgery or other intervention is planned in the next 4 weeks.	2 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for a pre op.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a protective boot for at least 4 weeks.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for chronic pain.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for known or suspected septic arthritis or osteomyelitis.; A plain x-ray of the area been done.; The results of the plain film x-ray were abnormal.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered for neuroma.; The patient has had foot pain for over 4 weeks.; No treatments are underway or completed.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a foot MRI.; The study is being ordered forfoot pain.; The study is being ordered to rule out tarsal coalition.; The patient has had foot pain for over 4 weeks.; The patient has been treated with anti-inflammatory medication for at least 6 weeks.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Abnormal Varus or Valgus stress testing was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Baker's cyst (swelling in the back of the knee) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Effusion with blood (Hemarthrosis) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Knee immobilizer; The ordering MDs specialty is NOT Orthopedics.	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with an Ace bandage; The ordering MDs specialty is NOT Orthopedics.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Positive Apley's, Ege's, or McMurray's test (abnormal) was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	11 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; Blood or abnormal fluid in the knee joint was noted as an indication for knee imaging	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	7 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with a Knee immobilizer; The ordering MDs specialty is NOT Orthopedics.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; It is not known if the study is requested for ankle pain.; The study is not requested for any of the standard indications for Knee MRI	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The member has a recent injury.	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for infection or inflammation.; There are physical exam findings, laboratory results, other imaging including bone scan or ultrasound confirming infection, inflammation and or septic necrosis.; Surgery or other intervention is not planned for in the next 4 weeks.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is for post operative evaluation.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The study is not requested for any of the standard indications for Knee MRI	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	4 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is a suspicion of an infection.; The patient is taking antibiotics.; Non Joint is being requested.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	This is not a pulsatile mass.; There is not a suspicion of an infection.; This is not a study for a fracture which does not show healing (non-union fracture); This is not a pre-operative study for planned surgery.; Non Joint is being requested.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; It is not known if there is a suspicion of tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; Tendon or ligament injuryis not suspected.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; Tendon or ligament injuryis not suspected.; There is a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	There are 3 exams are being ordered.; The ordering MDs specialty is Hematologist/Oncologist	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; No, this is not a request for follow up to a known tumor or abdominal cancer.; It is unknown if this study is being ordered for staging of a known tumor (not) prostate, known prostate CA with PSA&gt; 10, abdominal mass, retroperitoneal mass or new symptoms including hematuria with known CA or tumor.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; Yes, this is a request for follow up to a known tumor or abdominal cancer.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; It is not known if there is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; It is unknown if the patient has new symptoms including hematuria, new lab results or other imaging studies including ultrasound, doppler or x-ray (plain film) findings, suspicion of an adrenal mass or suspicion of a renal mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; The patient does not have new symptoms including hematuria, new lab results or other imaging studies including ultrasound, doppler or x-ray (plain film) findings, suspicion of an adrenal mass or suspicion of a renal mass.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is no suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; There is suspicion of renal mass.; The suspicion of a renal mass was suggested by a physical exam.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are abnormal lab results or physical findings on exam such as rebound or guarding that are consistent with peritonitis, abscess, pancreatitis or appendicitis.; This study is being ordered for another reason besides Crohn's disease, Abscess, Ulcerative Colitis, Acute Non-ulcerative Colitis, Diverticulitis, or Inflammatory bowel disease.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of an Abscess of the upper abdominal area.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are clinical findings or indications of Diabetic patient with gastroparesis.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are clinical findings or indications of unexplained abdominal pain in patient over 75 years of age.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	3	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; It is not known if there has been any treatment or conservative therapy.; Chief Complaint: ;abdominal swelling, fatigue, fatty liver hx ;History of Present Illness;Ronald Hurley is seen for an initial visit today. Mr. Hurley is a 60 y.o. male w/ PMH of A-FIB, CHF, fatty liver, gout, HTN,& pacemaker. Reports he has alrea; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	01/24/2022; There has been treatment or conservative therapy.; THROMBOCYTOPENIA, GERD,IBS, NEAUSEA AND VOMITING, RASH; FOLFOX q 2 weeks from 3/2/22;MVASI added from 3/16/22; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	01/29/2020; There has been treatment or conservative therapy.; AXIETY AND DEPRESSION; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	2/7/2022; There has not been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	02/11/2022; There has been treatment or conservative therapy.; hot flashes and night sweats that are causing a rash on her forehead, upper;back/shoulders and between and around her breasts, occasional fatigue, occasional diarrhea, and nausea; CHEMOTHERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	03-28-2008; There has been treatment or conservative therapy.; Weight loss with diet changes over the past 6 months; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	03/11/2020; There has been treatment or conservative therapy.; NONE; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	03/28/2022; There has not been any treatment or conservative therapy.; ABDOMINAL PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	03/31/2022; There has not been any treatment or conservative therapy.; Terrible pain in the right back down the right leg; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	05/18/2021; There has been treatment or conservative therapy.; unknown; chemo; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	6/14/2022; There has not been any treatment or conservative therapy.; 06/14/22 FNA of R neck mass: High grade/poorly differentiated neuroendocrine carcinoma;05/28/22 CT N: A 3.4cm mass in the R mandibular angle anterior to the sternocleidomastoid, it is difficult to separate form the tail of the parotid and submandibular g; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	06/20/2019; There has been treatment or conservative therapy.; BREAST CANCER, RESPONSE TO TREATMENT; CHEMOTHERAPY AND SURGERY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	7/1/2021; There has been treatment or conservative therapy.; UNKNOWN; HYSTERECTOMY 7/1/2021 ; letrozole 8/2021; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	7/15/2021; There has been treatment or conservative therapy.; ; Pt reports completion of 6 cycles of Carbo/ Taxol on 0125/2022 with Dr. Dorrah; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	08/28/2018; There has been treatment or conservative therapy.; /23/2021: Erin comes in today for follow-up visit. She had a CT scan which looks good. She is excited about her daughter's wedding in August. She has no new symptoms. She is undecided about the COVID-19 vaccine.;3/15/2021: Erin returns today for follow-u; /23/2021: Erin comes in today for follow-up visit. She had a CT scan which looks good. She is excited about her daughter's wedding in August. She has no new symptoms. She is undecided about the COVID-19 vaccine.;3/15/2021: Erin returns today for follow-u; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	09/17/2018; There has been treatment or conservative therapy.; MEG pain and GERD with abnormal radiological finding by CTs 9/11 that showed gb wall thickening.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	09/24/2021; There has been treatment or conservative therapy.; Abdominal pain and flank pain; Neoadjuvant letrozole started 10/29/21.;Verzenio started 12/09/21.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	10/10/2012; There has been treatment or conservative therapy.; ; Ms. Jennie Ewing presents to the clinic for evaluation and management of History of Breast Cancer with new onset back pain. ;She reports that she started having back pain about 4 months ago. She was treated for constipation. About 5 weeks ago she went to; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	11/02/2021; There has been treatment or conservative therapy.; joint ACHES AND PAINS;POLYCYTHEMIA VERA; Skin cancer - squamous cell removed off Right arm -- Feb 2021.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	12/17/2019; There has been treatment or conservative therapy.; WEIGHT LOSS, FATIGUE, GI ISSUES; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	12/30/2020; There has been treatment or conservative therapy.; Anemia of questionable etiology. Suspect she is iron deficient from blood loss; CHEMOTHERAPY; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 10/25/2021; It is not known if there has been any treatment or conservative therapy.; abdominal and chest pain, Urinary hesitancy and intermittency.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Enter date of initial onset here - or Type In Unknown If No Info Given It is not known if there has been any treatment or conservative therapy.; Describe primary symptoms here - or Type In Unknown If No Info Given The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	followup exam for breast cancer; There has been treatment or conservative therapy.; breast cancer; radiation ;chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	History of Malignant thymoma; evaluation of disease and weight loss.; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	MAMMOGRAM ON 4-26-22 WITH ULTRASOUND SHOWED 2 MASSES IN UPPER OUTER QUADRANT OF BREAST. DOMINANT MASS IS 3.2 CM AND IS SUPEROLATERL TO THIS MASS IS A 1.4 CM DENSITY. BOTH HAVE SPECIUALTED MARGINS. ULTRASOUND SHOWS THIS IS 8 CMFN. ON U/S THE LARGER MASS IS ; There has been treatment or conservative therapy.; 2 MASSES IN BREASTS IN THE SIZES STATED EARLIER. BIOPSY NO 5-6-22 SHOWED IDC, G2, ER/PR (+), Her 2 (-) FOR BOTH. fOCAL ASSOCIATED LOW TO INTERMEDIATE GRADE DCIS; MAMMOGRAM, U/S AND BX. SCANS ARE TO EVALUATE EXTENT OF DISEASE.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	metastatic renal cell carcinoma; There has been treatment or conservative therapy.; metastatic renal cell carcinoma; chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	NA; There has been treatment or conservative therapy.; abdominal pain, back issues, and anxiety; CHEMO; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	Neoplasm: colorectal ;rectal cancer; There has been treatment or conservative therapy.; Neoplasm: colorectal ;rectal cancer; radiation;chemotherapy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for protein.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for acute pain.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; It is not known if this study is being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is follow up trauma.; There is not laboratory or physical evidence of an intra-abdominal bleed.; There is physical or abnormal blood work consistent with peritonitis or abdominal abscess.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient has Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Foreign Body; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	6	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was NOT performed.; Yes this is a request for a Diagnostic CT	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient did not have an Ultrasound.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for organ enlargement.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; The abnormality found on a previous CT, MRI or Ultrasound was not in the liver, kidney, pancreas or spleen.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the pancreas during a previous CT, MRI or Ultrasound.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a tumor.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; It is unknown if there is suspicion of metastasis.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; This study is NOT being ordered to evaluate an undescended testicle in a male.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	74712 Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single or first gestation	This a request for a Fetal MRI.; An ultrasound of the mother been completed.; Congenital or vascular anomalies of the brain or skull has been identified or remains uncertain after an ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	This is a request for a heart or cardiac MRI	3	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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)	48 y.o. Caucasian male is here today for follow up for precordial chest pain, shortness of breath, dyspnea on exertion, intermittent claudication, hypercholesteremia, smoking and family history of CAD. The patient reports chest pain that he has had for m; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 06/10/22; It is not known if there has been any treatment or conservative therapy.; 48 y.o. Caucasian male is here today for follow up for precordial chest pain, shortness of breath, dyspnea on exertion, intermittent claudication, hypercholesteremia, smoking and family history of CAD. The patient reports chest pain that he has had for m; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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)	Patient has ST-T changes, overweight and smokes, chest pain at Rest, Irregular heartbeat; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/14/22; There has been treatment or conservative therapy.; Hypertension chest pain, history of cardiac death; cardio, exercise and diet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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)	This is a request for CTA Coronary Arteries.; The patient has not had other testing done.; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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)	This is a request for CTA Coronary Arteries.; The study is requested for known or suspected valve disorders.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	4	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	6	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	dense breast tissue; This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are NOT benign lesions in the breast associated with an increased cancer risk.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	Enter answer here - or Type In Unknown If No Info Given. This is a request for Breast MRI.; This study is being ordered for known breast lesions; No, this is not an individual who has known breast cancer in the contralateral (other) breast.; No, this is not a confirmed breast cancer.; It is not known if this patient have axillary node adenocarcinoma.; It is unknown if there are benign lesions in the breast associated with an increased cancer risk.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	new cancer diagnosis; This is a request for Breast MRI.; This study is being ordered for something other than known breast cancer, known breast lesions, screening for known family history, screening following genetic testing or a suspected implant rupture.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; The patient has a lifetime risk score of greater than 20.	1	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination following genetic testing for breast cancer.; Yes, the patient have a known mutation such as BRCA1, BRCA2, PTEN or TP53.; It is unknown if the patient has a lifetime risk score of greater than 20.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered as a screening examination for known family history of breast cancer.; There is a pattern of breast cancer history in at least two first-degree relatives (parent, sister, brother, or children).	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.; No, this is not an individual who has known breast cancer in the contralateral (other) breast.; Yes, this is a confirmed breast cancer.; Yes, the results of this MRI (size and shape of tumor) affect the patient's further management.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for a known history of breast cancer.;	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77046 Magnetic resonance imaging, breast, without contrast material; unilateral	This is a request for Breast MRI.; This study is being ordered for known breast lesions.; There are benign lesions in the breast associated with an increased cancer risk.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	77078 Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	This is a request for a Bone Density Study.; This patient has not had a bone mineral density study within the past 23 months.; This is a bone density study in a patient with clinical risk of osteoporosis or osteopenia.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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	; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	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	This is a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.; This case was created via RadMD.; Agree; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)		1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Another test besides a Nuclear Cardiology Study, CCTA or Stress Echocardiogram has been completed to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	1. Recurrent exertional palpitations shortness of breath for several months. Prior cardiac testing.;2. Elevated blood pressure without diagnosed hypertension: Blood pressure mildly elevated today. She is not on any medications.;3. Obesity: Moderate; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	50 y.o. Caucasian male is here today for follow up for atrial fibrillation, nonischemic cardiomyopathy, left atrial dilatation, left ventricular dilatation, mitral and tricuspid regurgitation, aortic insufficiency, hypercholesterolemia, and family history; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	52 y.o. Caucasian male is here today for follow up for palpitations, tricuspid regurgitation, hypercholesterolemia, former tobacco user, and family history of CAD. Patient reports palpitations are becoming more frequently. He describes him as a flutter ; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	60-year-old white male who presents with mid precordial chest tightness, nonradiating, associated with dyspnea, moderate, frequently severe in intensity, lasting approximately 5 minutes, spontaneous resolution. Symptoms are randomly occurring with no iden; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	63-year-old Middle Eastern female who presents with heart palpitations further described as a sensation of racing heart rate, rapid regular throbbing, associated with dyspnea, lasting 5 minutes, spontaneous resolution. Symptoms are randomly occurring with; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; It is unknown if the patient had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are not new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; GERD, HYPERTENSION, AF, ABDNORMAL EKG; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	minutes before chest pain went away.;++ Concern for atypical angina. Intermediate pretest probability of coronary artery disease. Will proceed with noninvasive ischemic evaluation and perform and ECHO to rule out tructural heart disease as a cause of pat; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Palpitations are secondary to occasional PACs with burden of 1.15% and rare PVCs. Primarily they are secondary to multiple episodes of supraventricular tachycardia, 225 episodes were recorded, the longest lasting 6 beats and the fastest 195 bpm.;Discont; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Patient is 61 years old, a diabetic, has hypertension, BMI of 36.31, history of CAD, CABG, pad, blood clot in legs, heart attack, hyperlipidemia and chest tightness occurs with exertion; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Don't know or Other than listed above best describes the reason for ordering this study	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The symptoms cannot be described as "Typical angina" or substernal chest pain that is worse or comes on as a result of physical exertion or emotional stress; It is unknown if the chest pain was relieved by rest (ceasing physical exertion activity) and/or nitroglycerin; The patient has None of the above physical limitations; The patient has NOT had a recent stress imaging study within the last year; The symptoms are new or changing with new EKG changes or the patient has a left bundle branch block	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; Other cardiac stress testing was completed 6 months or less ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.; The BMI is 40 or greater	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The member does not have known or suspected coronary artery disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for congestive heart failure.; It is not known if the member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for evaluation of the heart prior to non cardiac surgery.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via BBI.; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; New symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed within the last year; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed	12	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; Changing symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has NOT been completed; New symptoms of chest pain or shortness of breath best describes the reason for ordering this study; The symptoms began or changed within the last 6 months	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; This case was created via RadMD.; Agree; Other cardiac stress testing was completed More than 6 months ago; Changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study; The symptoms began or changed More than 1 year ago; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, Stress Echocardiogram or Transthoracic Echocardiogram has been completed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78451 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); single study, at rest or stress (exercise or pharmacologic)	unknown; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient had a recent stress echocardiogram to evaluate new or changing symptoms.; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; There is known coronary artery disease, history of heart attack (MI), coronary bypass surgery, coronary angioplasty or stent.; The member has known or suspected coronary artery disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Chemotherapy.; Chemotherapy has been initiated or completed.; The last MUGA scan was performed within the last 3 months.; Chemotherapy patient assess LV function	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is being ordered for Chemotherapy.; Chemotherapy has not been initiated or completed.; Chemotherapy is planned.; ESTABLISH A BASELINE EF PRIOR TO CARDIOTOXIC TREATMENT	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78472 Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing	This is a request for a MUGA scan.; This study is NOT being ordered for Chemotherapy, Known Cardiomyopathy/ Myocarditis, Suspected Cardiomyopathy/ Myocarditis, or Congestive Heart Failure.; high risk medication	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Thyroid Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lung Cancer.; This PET Scan is being requested for Restaging during ongoing therapy or treatment; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lymphoma or Myeloma.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Melanoma.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for an other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; A biopsy substantiated the cancer type; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Breast Cancer.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the axillary lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is NOT a Medicare member.; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78813 Positron emission tomography (PET) imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy has NOT substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for an other solid tumor.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Breast Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Colo-rectal Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Lymphoma or Myeloma.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Breast Cancer.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the axillary lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging during ongoing therapy or treatment; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 3 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; 3 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Melanoma.; This is a Medicare member.; This study is being requested for None of the above; A sentinel biopsy was performed on the regional lymph nodes; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	This nodule is Existing (stable, being followed with any modality); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; There has NOT been a change in clinical status since the last echocardiogram.; This request is NOT for initial evaluation of a murmur.; This is a request for follow up of a known murmur.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	c/o of s.o.b. and h/o cardiac murmur, with change in character and intensity. Abnormal EKG; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; It is unknown if there been a change in clinical status since the last echocardiogram.; It is unknown if this request is for initial evaluation of a murmur.; This is a request for follow up of a known murmur.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Coronary arteriosclerosis, There is change in EKG now compared to 2019, unable to walk 1/4 mile, has known CAD, s/p stents x3 in FL in 2003 per pt . Heart cath here in 2019 showed mod 3 vessel CAD tx medically. Echo in 2019, EF wnl, has diastolic dysfunction; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	1 2022 2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Elevated BMP shortness of breath; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Heart Failure; It is unknown if there been a change in clinical status since the last echocardiogram.; It is unknown if this is for the initial evaluation of heart failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; UNKNOWN; There has not been any treatment or conservative therapy.; GERD, HYPERTENSION, AF, ABDNORMAL EKG; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	evaluation of LVEF for chemotherapy; This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; The ordering provider's specialty is NOT Cardiac Surgery, Cardiology, Thoracic Surgery, Hematologist/Oncologist or Rheumatology; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has NOT been completed in the past 6 weeks; This procedure is NOT being ordered along with other cardiac testing, such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for Chest pain of suspected cardiac etiology ; Other testing such as Exercise Treadmill Testing, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed in the past 6 weeks; Results of other testing completed confirm chest pain was of cardiac origin	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; It is unknown if the murmur is described as grade 3/6 or greater; There are clinical symptoms supporting a suspicion of structural heart disease; This is a request for the initial evaluation ; The study is being ordered for Evaluation of a Murmur	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; The reason for ordering this study is unknown.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; It is unknown if there been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; The patient has a history of hypertensive heart disease.; There is a change in the patient's cardiac symptoms.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Known or suspected left ventricular disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; There has been a change in clinical status since the last echocardiogram.; This is not for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of a cardiac mass.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has a cardiac mass seen on x-ray	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicativie of heart disease.; The abnormal symptom, condition or evaluation is not known or unlisted above.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Shortness of breath is not related to any of the listed indications.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; This study is being requested for the initial evaluation of frequent or sustained atrial or ventricular cardiac arrhythmias.; The patient has an abnormal EKG	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for another reason; This study is being ordered for evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicative of heart disease.; This is for the initial evaluation of heart failure.; This is for the initial evaluation of abnormal symptoms, physical exam findings, or diagnostic studies (chest x-ray or EKG) indicatvie of heart disease.; The patient has shortness of breath; Known or suspected Congestive Heart Failure.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Embolism.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; It is unknown if the murmur is grade III (3) or greater.; There are clinical symptoms supporting a suspicion of structural heart disease.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; The murmur is grade III (3) or greater.; This request is for initial evaluation of a murmur.; The murmur is grade III (3) or greater.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Murmur.; This request is for initial evaluation of a murmur.; The murmur is NOT grade III (3) or greater.; There are NOT clinical symptoms supporting a suspicion of structural heart disease.; This is NOT a request for follow up of a known murmur.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; The patient has suspected prolapsed mitral valve.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 7-9 months since the last echocardiogram.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an annual review of known valve disease.; It has been 12 - 23 months or more since the last echocardiogram.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an evaluation of new or changing symptoms of valve disease.	Apr-Jun 10 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Valves.; This is an initial evaluation of artificial heart valves.	Apr-Jun 1 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	unknown; This a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Left Ventricular Function.; The patient does not have a history of a recent heart attack or hypertensive heart disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for diagnosis and management of infective endocarditis.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of atrial fibrillation or flutter to determine the presence or absence of left atrial thrombus or evaluate for radiofrequency ablation procedure.; The patient is 18 years of age or older.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93312 Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	This a request for an echocardiogram.; This is a request for a Transesophageal Echocardiogram.; This study is being requested for evaluation of suspected acute aortic pathology such as aneurysm or dissection.; The patient is 18 years of age or older.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93350 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;	This is a request for a Stress Echocardiogram.; Assessment of risk for a patient without symptoms or history of ischemic/coronary artery disease best describes the patients clinical presentation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is a Medicare member.; The patient has new or worsening symptoms not medically controlled ; The ordering MDs specialty is not Cardiology or Cardiac Surgery	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93350 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;	This is a request for a Stress Echocardiogram.; New, worsening, or changing cardiac symptoms with a previous history of ischemic/ coronary artery disease best describes the patients clinical presentation.; This is NOT a Medicare member.; The patient has None of the above	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93350 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;	This is a request for a Stress Echocardiogram.; Routine follow up of patient with previous history of ischemic/ coronary artery disease without new or changing symptoms best describes the patients clinical presentation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93350 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;	This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	93350 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;	This is a request for a Stress Echocardiogram.; The patient has NOT had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The member has known or suspected coronary artery disease.	10	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Lumbar Spine; 04/18/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Lumbar Spine selected as the specific body part; Body Part pass complete; Questions about your Lumbar Spine request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; One Body Part selected; No Second Pass; Requestor is not a fax; Mild or moderate functional deficits due to lumbopelvic impairments with distal symptoms best describes the patient's clinical presentation; Spine/Chest selected as the body type/region; Physical Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Physical therapy was requested	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	97533 Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes		Body Part passes complete; Perform Body Part selection; Perform Body Part selection; First Pass; Second Pass check point; Body Part for first pass is Hip/Pelvis; Body Part for second pass is Hip/Pelvis; 04/09/2022; No patient history in the past 90 days; Evaluation dates less than 90 days in the past; Non-Surgical; Hip/Pelvis selected as the specific body part; Hip/Pelvis selected as the specific body part; Body Part pass complete; Questions about your Pelvis/Hip request; ; Questions about your Pelvis/Hip request; ; Three or more visits anticipated; The anticipated number of visits is other than 2.; The anticipated number of visits is other than 2.; Therapy type is Rehabilitative; Two Body Parts selected; Second Pass Starting; Requestor is not a fax; The hip is being treated.; The Pelvis/Pelvic Floor is being treated.; Moderate objective and functional deficits: constant symptoms and/or symptoms that are intensified with activity with moderate loss of range of motion, strength, or ability to perform daily tasks best describes the patient's presentation best describes th; The patient has Pelvic Floor Dysfunction, including bowel or bladder; Mild to moderate impairment in the ability to perform functional tasks due to constipation, incontinence or pelvic organ prolapse best describes the patient's presentation; Lower Extremity/Hip was selected as the first body type/region; Lower Extremity/Hip selected as the second body type/region; Occupational Therapy; Speech Therapy was not selected; The evaluation date is not in the future; The rehabilitation is NOT related to a diagnosis of cancer.; The rehabilitation is NOT related to a diagnosis of Lymphedema.; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Physical or Occupational therapy was selected; Magellan does not manage chiropractic but does manage speech therapy for the member's plan; Occupational Therapy was requested	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		EGD showed peptic ulcers and a hiatal hernia. She has bene on BID PPI therapy for the past month. States her prior symptoms have resolved. She has mild epigastric tenderborderline GB wall thickening and a 6mm CBDness on exam; This is a request for MRCP.; There is no reason why the patient cannot have an ERCP.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has not undergone an unsuccessful ERCP.; The patient has an altered biliary tract anatomy that precludes ERCP.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Approval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		This is a request for MRCP.; There is a reason why the patient cannot have an ERCP.; The patient has undergone unsuccessful ERCP and requires further evaluation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; 'None of the above' best describes the patient's tumor.; Known or suspected tumor best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Changing neurologic symptoms best describes the reason that I have requested this test.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; New onset of seizures or newly identified change in seizure activity or pattern best describes the reason that I have requested this test.; None of the above best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; Recent (in the past month) head trauma; The patient is NOT on anticoagulation or blood thinner treatments; There are recent neurological symptoms or deficits such as one-sided weakness, numbness, vision defects, speech impairments or sudden onset of severe dizziness	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a chronic headache, longer than one month; Headache best describes the reason that I have requested this test.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a headache, elevated sedimentation rate and or the patient is over 55 years old; Headache best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; The patient has a new onset of a headache within the past month; Headache best describes the reason that I have requested this test.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70450 Computed tomography, head or brain; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a brain/head CT.; This is NOT a Medicare member.; Known or suspected TIA (stroke) with documented new or changing neurologic signs and or symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a Sinus CT.; This study is being ordered for sinusitis.; The patient is NOT immunocompromised.; The patient's current rhinosinusitis symptoms are described as Chronic Rhinosinusitis (episode is greater than 12 weeks); Yes this is a request for a Diagnostic CT	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70486 Computed tomography, maxillofacial area; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; "This request is for face, jaw, mandible CT.239.8"; "There is not a history of serious facial bone or skull, trauma or injury.fct"; "There is not a suspicion of neoplasm, tumor or metastasis.fct"; "There is not a suspicion of bone infection, [osteomyelitis].fct"; This is not a preoperative or recent postoperative evaluation.; Yes this is a request for a Diagnostic CT	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The patient has a neck lump or mass.; There is NOT a palpable neck mass or lump.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70490 Computed tomography, soft tissue neck; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for neck soft tissue CT.; The study is being ordered for something other than Trauma or other injury, Neck lump/mass, Known tumor or metastasis in the neck, suspicious infection/abcess or a pre-operative evaluation.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the Neck.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; It is not known if there has been any treatment or conservative therapy.; Weakness,Dizziness, Paralysis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70540 Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	Radiology Services Denied Not Medically Necessary	I reviewed Mercy notes which she was seen on 5/20/22. Dr. Chen dx her with Lacertus Syndrome. EMG was negative. He recommended surgery but patient would like to see what neck MRI reports states first before making a final decision.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; Patient has weakness in her left hand. Difficulty holding objects. Burning sensation like "fire" in palmar aspect of hands. She stopped taking her Topamax as this was making her numbness worse.;Recently her pain has worsen and has lead to headaches. In; Patient has tried motrin, CBD oil, massage, and stretching.;She went back to PT for 30 sessions.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a neurological disorder.; ; It is not known if there has been any treatment or conservative therapy.; Weakness,Dizziness, Paralysis; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 04/05/2022; There has been treatment or conservative therapy.; Facial numbness has a TIA and headaches; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	RESTAGING OF MALIGNANT OF HEAD,NECK AND FACE; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	1 2022 2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is being requested for evaluation of a headache.; The patient has a chronic or recurring headache.	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient does not have dizziness, fatigue or malaise, sudden change in mental status, Bell's palsy, Congenital abnormality, loss of smell, hearing loss or vertigo.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has a sudden change in mental status.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; It is unknown why this study is being ordered.; The patient has Dizziness or Vertigo	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; This study is being ordered for an aneurysm.; This study is being ordered as a screening for an aneurysm or AVM (arteriovenous malformation).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; It is not known if there has been any treatment or conservative therapy.; Chief Complaint: ;abdominal swelling, fatigue, fatty liver hx; ;History of Present Illness:Ronald Hurley is seen for an initial visit today. Mr. Hurley is a 60 y.o. male w/ PMH of A-FIB, CHF, fatty liver, gout, HTN,&amp; pacemaker. Reports he has alrea; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	'None of the above' describes the reason for this request.; 'None of the above' led to the suspicion of infection; This is a request for a Chest CT.; This study is being requested for known or suspected infection (pneumonia, abscess, empyema).; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient did NOT quit smoking in the past 15 years.; The patient does NOT have signs or symptoms suggestive of lung cancer such as an unexplained cough, coughing up blood, unexplained weight loss or other condition.; The patient has NOT had a Low Dose CT for Lung Cancer Screening or a Chest CT in the past 11 months.; Yes this is a request for a Diagnostic CT ; This study is being ordered for screening of lung cancer.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is NO radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	CT on 6/25/22 found mediastinal adenopathy.; There has not been any treatment or conservative therapy.; Acute sharp shooting back pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	NA; There has been treatment or conservative therapy.; abdominal pain, back issues, and anxiety; CHEMO; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	She expresses concern due to FH of ovarian cancer and lung cancer. She also notes pain to palpation and with deep inspiration to the posterolateral aspect of the right chest wall. She did c/o left breast pain in December with subsequent neg mammogram 12/2; There has been treatment or conservative therapy.; with c/o increase in soft tissue size of the right mid axillary chest wall compared to left. She has really noticed this over the last week. She also notes pain to palpation and with deep inspiration to the posterolateral aspect of the right chest wall. S; She has also noticed night sweats over the past few months. These are intermittent as well. Typically occurring in 2 week cycles. She typically has to change clothes/sheets. She denies fever, chills, weight loss, abnormal bleeding or bruising, lymphadenop; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	symptoms began in 2020 and have been ongoing and getting worse since then. It has progressed to the point she has to use a walker to ambulate.; There has been treatment or conservative therapy.; Diffuse muscle pain and all over weakness effecting and impairing quality of life. patient is only 57 years old; has to use a walker to ambulate; patient has had an EMG which showed positive for moderate neuropathy and started on Gabapention 800 mg qid. Also takes prescription steroids, uses a walker to ambulate, has been compliant with all scripts, home therapies, and office/doctor visits.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There is no radiologic evidence of asbestosis.; "There is no radiologic evidence of sarcoidosis, tuberculosis or fungal infection."; There is no radiologic evidence of a lung abscess or empyema.; There is no radiologic evidence of pneumoconiosis e.g. black lung disease or silicosis.; There is NO radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	There is radiologic evidence of non-resolving pneumonia for 6 weeks after antibiotic treatment was prescribed.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT; This study is being ordered for known or suspected inflammatory disease or pneumonia.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; There has been treatment or conservative therapy.; ; pantoprazole, avoid spicy, acidic, or tomato-based foods like chocolate, tomatoes, citrus fruits and fruit juices. Limit intake of coffee, tea, and cola. Watch your weight. Eat moderate amount of food at mealtime. Meals at least 3 to 4 hours prior to mea; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; There has not been any treatment or conservative therapy.; bone pain, pain in her breasts; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is 81 years old or older.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; Patients who are NOT between the ages of 50 and 80 years of age do not meet the criteria for lung cancer screening.	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	Radiology Services Denied Not Medically Necessary	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient quit smoking less than 15 years ago.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	71550 Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	This study is not to be part of a Myelogram.; This is a request for a Cervical Spine CT; This study is being ordered due to follow-up surgery or fracture within the last 6 months.; The patient has been seen by, or the ordering physician is, a neuro-specialist, orthopedist, or oncologist.; There is a reason why the patient cannot have a Cervical Spine MRI.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72125 Computed tomography, cervical spine; without contrast material	Radiology Services Denied Not Medically Necessary	to rule out Herniated nucleus pulposis, Spinal Stenosis and;Spondylosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04-11-2022; There has not been any treatment or conservative therapy.; ache/pain in Neck, Low back and mid back.the pain radiates to;the right lower extremity.throbbing.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72128 Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72128 Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal CXR R93.89;The report requires further follow up; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; R63.4;Abnormal intentional weight loss; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72128 Computed tomography, thoracic spine; without contrast material	Radiology Services Denied Not Medically Necessary	to rule out Herniated nucleus pulposis, Spinal Stenosis and;Spondylosis; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 04-11-2022; There has not been any treatment or conservative therapy.; ache/pain in Neck, Low back and mid back.the pain radiates to;the right lower extremity.throbbing.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal CXR R93.89;The report requires further follow up; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; It is not known if there has been any treatment or conservative therapy.; R63.4;Abnormal intentional weight loss; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is reflex abnormality.; ; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; ; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; HARD TO WALK; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; limited range motion; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; Pt needs order for Vertebroplasty.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is weakness.; see attached clinicals; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; None of the above; It is not known if the patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has had back pain for over 4 weeks.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72131 Computed tomography, lumbar spine; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a lumbar spine CT.; Trauma or recent injury; The patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is no weakness or reflex abnormality.; There is not x-ray evidence of a recent lumbar fracture.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Neurological Disorder	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	attachments; Jan. 2022; There has been treatment or conservative therapy.; Numbness, tingling to lower extremities. Legs giving out. Weakness. Falling.; PT/OT;Chiropracture;Medications; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	injured arm, numbness whole body with last 3 month; unknown; There has been treatment or conservative therapy.; low back pain numbness dizziness; PT, medication HEP; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	POSSIBLE SURGERY; This study is being ordered for trauma or injury.; PT IS UNSURE OF DATE OF INJURY; There has not been any treatment or conservative therapy.; BURNING, SWELLING, SEVERE PAIN; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinicals; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; This study is being ordered for Other	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; The patient is demonstrating unilateral muscle wasting/weakness; This study is being ordered for Multiple Sclerosis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; This study is being ordered for Trauma / Injury	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this procedure is unknown.; It is unknown if any of these apply to the patient	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Neurologic deficits; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The patient has a new onset or changing radiculitis / radiculopathy; The trauma or injury did NOT occur within the past 72 hours.; The pain did NOT begin within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury did NOT occur within the past 72 hours.; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; The reason for ordering this test is Trauma or recent injury; The trauma or injury occur within the past 72 hours.; The patient had an abnormal xray indicating a complex fracture or severe anatomic derangement of the cervical spine; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; The patient has a neurologic deficit; This is NOT a Medicare member.; The patient has Focal upper extremity weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The pain began within the past 6 weeks.; Within the past six (6) weeks the patient completed or failed a trial of physical therapy, chiropractic or physician supervised home exercise	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient does not have any of the above listed items; The pain did NOT begin within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Acute / new neck pain; The patient has a new onset or changing radiculitis / radiculopathy; The pain did NOT begin within the past 6 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient does not have any of the above listed items	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had a diagnostic test (such as EMG/nerve conduction) involving the Cervical Spine	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient had an abnormal xray indicating a complex fracture or other significant abnormality involving the cervical spine; This is NOT a Medicare member.	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has a new onset or changing radiculitis / radiculopathy	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; The patient has been treated with a facet joint or epidural injection within the past 6 weeks	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for Chronic / longstanding neck pain; Within the past 6 months the patient had 6 weeks of therapy or failed a trial of physical therapy, chiropractic or physician supervised home exercise; This is NOT a Medicare member.	8	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for cervical spine MRI; This procedure is being requested for None of the above; None of the above describes the reason for requesting this procedure.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; 12/19/2018 per listed problem history for low back pain, lumbar instability, and neck pain. Chronic occurrence; There has been treatment or conservative therapy.; Lower back and neck pain exacerbated by ROM and bending. Chronic and recurrent since 2018; Back brace ordered 2018 w/ lifetime prescribed use and medication for pain mitigation. Physical therapy for unknown period of time.; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; This study is being ordered for a neurological disorder.; unknown; There has been treatment or conservative therapy.; Pain; Pt, Home exercise medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72141 Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; Unknown; There has been treatment or conservative therapy.; Low back pain, neck pain, multiple joint pain; PT has had Physical Therapy, medication; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; This study is being ordered for Neurological Disorder	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	injured arm, numbness whole body with last 3 month; unknown; There has been treatment or conservative therapy.; low back pain numbness dizziness; PT, medication HEP; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	N/A; 03/28/2022; There has been treatment or conservative therapy.; LOW BACK PAIN,; PHYSICAL THERAPY, HOME EXERCISES AND PAIN MEDICINE; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Pre operative evaluation; 12/31/2019; There has been treatment or conservative therapy.; Myelopathy; activity modification, over the counter analgesics, opiates, physical therapy and steroid injections; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	pre-op evaluation before epidural steroid injections.; unknown; There has been treatment or conservative therapy.; low back pain and mid back pain.; PT, HEP, and medications; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does have a new foot drop.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does not have new signs or symptoms of bladder or bowel dysfunction.; There is recent evidence of a thoracic spine fracture.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Acute or Chronic back pain; The patient does not have new or changing neurologic signs or symptoms.; The patient has had back pain for over 4 weeks.; The patient has seen the doctor more then once for these symptoms.; The physician has directed conservative treatment for the past 6 weeks.; It is not known if the patient has completed 6 weeks of physical therapy?; The patient has been treated with medication.; The patient was treated with an Epidural.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Follow-up to Surgery or Fracture within the last 6 months; The patient has been seen by or is the ordering physician an oncologist, neurologist, neurosurgeon, or orthopedist.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for Neurological deficits; The patient does have new or changing neurologic signs or symptoms.; The patient does not have a new foot drop.; The patient does have new signs or symptoms of bladder or bowel dysfunction.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for a thoracic spine MRI; This study is being ordered for None of the above; It is not known if the patient does have new or changing neurologic signs or symptoms.; It is not known if the patient has had back pain for over 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72146 Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	Radiology Services Denied Not Medically Necessary	Worsening neurological symptoms despite PT.; 2/2022; There has been treatment or conservative therapy.; Full body pain. Bilateral thoracic region radiating to behind legs. difficulty laying down. Pain in hips. PT has been difficult. Headaches and blurry vision for last 3 days. Right knee pain with extended walking. Numbness in right foot.; Physical therapy and medications.; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; ; There has been treatment or conservative therapy.; ; ; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This study is being ordered for Cancer/ Tumor/ Metastatic Disease ; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Trauma / Injury; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics; There are neurological deficits on physical exam; The patient is demonstrating unilateral muscle wasting/weakness	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	attachments; Jan. 2022; There has been treatment or conservative therapy.; Numbness, tingling to lower extremities. Legs giving out. Weakness. Falling.; PT/OT;Chiropracture;Medications; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	due to pain and hyperreflexia; 2013; There has been treatment or conservative therapy.; worsening neck and lower back pain with bilateral arm radiation along shoulders and arms through thumb bilaterally. She reports issues with hand function/dexterity.; Physical therapy/ medication; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	injured arm, numbness whole body with last 3 month; unknown; There has been treatment or conservative therapy.; low back pain numbness dizziness; PT, medication HEP; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Moderate pain to deep palpation over left ischial spine as well as left hip over greater trochanter; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown - chronic back pain and worsening left hip, buttock pain; There has been treatment or conservative therapy.; Since last visit pt has been experiencing worsening left hip, buttock pain. Pain is worse with movement and pressure. Also experiencing new right upper quadrant pain that is intermittent and not associated with meals, pt also notes it feels worse when st; Pt continues to take chronic medications without recent changes to medications. No acute events since stopping amiodarone prior to last visit.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	N/A; 03/28/2022; There has been treatment or conservative therapy.; LOW BACK PAIN; PHYSICAL THERAPY, HOME EXERCISES AND PAIN MEDICINE; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	pre-op evaluation before epidural steroid injections.; unknown; There has been treatment or conservative therapy.; low back pain and mid back pain.; PT, HEP, and medications; This study is being ordered for Pre Operative or Post Operative evaluation; The ordering MDs specialty is NOT Neurological Surgery or Orthopedics	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	see attached clinicals; see attached clinicals; There has been treatment or conservative therapy.; see attached clinicals; see attached clinicals; This study is being ordered for Other	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; It is unknown if the patient has acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Known or suspected tumor with or without metastasis	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested as a Pre-operative evaluation	Apr-Jun 11 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for 6 weeks of completed conservative care in the past 6 months	Apr-Jun 26 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for an Abnormal x-ray indicating a complex fracture or severe anatomic derangement of the lumbar spine; This is NOT a Medicare member.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Follow-up to spine injection in the past 6 months	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); The patient has None of the above	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Abnormal Reflexes	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	Apr-Jun 6 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for Neurological deficit(s); This is NOT a Medicare member.; The patient has Physical exam findings consistent with myelopathy	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient has acute or chronic back pain.; This study is being requested for None of the above	13	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; This case was created via RadMD.; Cannot agree/affirm; Medications have been taken for the patient's back pain; The procedure is being ordered for acute or chronic back pain	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; 12/19/2018 per listed problem history for low back pain, lumbar instability, and neck pain. Chronic occurrence; There has been treatment or conservative therapy.; Lower back and neck pain exacerbated by ROM and bending. Chronic and recurrent since 2018; Back brace ordered 2018 w/ lifetime prescribed use and medication for pain mitigation. Physical therapy for unknown period of time.; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; Unknown; There has been treatment or conservative therapy.; Low back pain, neck pain, multiple joint pain; PT has had Physical Therapy, medication; This study is being ordered for Other	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72192 Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for some other reason than the choices given.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72192 Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered because of a suspicious mass/tumor.; "The patient has had a pelvic ultrasound, barium, CT, or MR study."; This is a request for a Pelvis CT.; There are NO documented physical findings (painless hematuria, etc.) consistent with an abdominal mass or tumor.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72192 Computed tomography, pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	; This is a request for a Pelvis MRI.; It is unknown if the patient had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	chronic worsening low back pain. She had MRI L spine- disc bulge at L4-L5.; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for something other than arthritis, slipped femoral capital epiphysis, bilateral hip avascular necrosis, osteomyelitis or tail bone pain or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	CT ABD/PELVIS W/WO COUNTRAST REVEALED LOW NEW ENLARGED LEFT PELVIC LYMPH NODE MEASURING 16X19 MM SUSPICIOUS FOR METASTATIC DISEASE; This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; An abnormality was found in something other than the bladder, uterus or ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Low back pain and mid back pain. Groin pain; This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for something other than arthritis, slipped femoral capital epiphysis, bilateral hip avascular necrosis, osteomyelitis or tail bone pain or injury.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	patient pain is 8/10, at its least it is 8/10, on an;average about 8/10, and currently it is 8/10. Worsening factors include: increased physical activity; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; shoulder pain, chronic pain in lower back hip pain; Recommend Physical Therapy patient is referred to physical therapy to be evaluated and treated;as per indications. The patient understands that this is an integral part of proper pain management programs.;PT treatment includes but is not limited to pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for joint pain or suspicion of joint or bone infection.; The study is being ordered for tail bone pain or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	patients has severe pain in right wrist and hand medications are not helping; This study is being ordered for a neurological disorder.; 04-11-2022; There has been treatment or conservative therapy.; rheumatoid arthritis, gout, carpal tunnel and osteoarthritis; medication management, home exercises, physical therapy and surgery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; It is not known if there has been any treatment or conservative therapy.; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73220 Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	The request is for an upper extremity non-joint MRI.; This is not a preoperative or recent postoperative evaluation.; There is not suspicion of upper extremity neoplasm or tumor or metastasis.; There is no suspicion of upper extremity bone or soft tissue infection.; The ordering physician is not an orthopedist.; There is not a history of upper extremity trauma or injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; MRI of left shoulder is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for thi; It is not known if there has been any treatment or conservative therapy.; MRI of left shoulder is being requested to further evaluate the patient's persistent pain and symptoms. Findings from this study will be incorporated in conjunction with objective findings into the decision process in formulating a treatment plan for thi; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	ncv in Feb 2022 showed carpal tunnel. her right elbow has been injected, had therapy and it is worse. She had xrays and it did not show any bony abnormality. She has been wearing a tennis elbow strap.; The pain is from a recent injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is a suspicion of tendon or ligament injury.; This is a request for an elbow MRI; The study is requested for evaluation of elbow pain.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	No fracture or dislocation evident. Slight spurring at the greater ;tuberosity of the proximal humerus. Acromioclavicular arthrosis. ;Prominent inferior spurring from the acromion; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Kevin is a 61 y.o. male who presents today bilateral shoulder pain. States that he hurt his left shoulder many years ago and so he began to use his his right arm more frequently to give his left shoulder a break. He is not complaining of pain in both sh; It is not known if there has been any treatment or conservative therapy.; Active abduction: abnormal ;Passive abduction: abnormal ;Extension: abnormal ;External rotation: abnormal ;Forward flexion: abnormal ;Hawkins test: negative;Cross arm: negative;Impingement: positive;Drop arm: negative; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	No improvement in symptoms with conservative therapy.; This study is being ordered for Inflammatory/ Infectious Disease.; 08-20-2021 shoulder pain;03-09-2022 knee pain; There has been treatment or conservative therapy.; ; Analgesics, oral steroids, period of rest, therapeutic exercises, and steroid injections.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	patient pain is 8/10, at its least it is 8/10, on an;average about 8/10, and currently it is 8/10. Worsening factors include: increased physical activity; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; shoulder pain, chronic pain in lower back hip pain; Recommend Physical Therapy patient is referred to physical therapy to be evaluated and treated;as per indications. The patient understands that this is an integral part of proper pain management programs.;PT treatment includes but is not limited to pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	patients has severe pain in right wrist and hand medications are not helping; This study is being ordered for a neurological disorder.; 04-11-2022; There has been treatment or conservative therapy.; rheumatoid arthritis, gout, carpal tunnel and osteoarthritis; medication management, home exercises, physical therapy and surgery; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	see attached clinicals; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinicals; It is not known if there has been any treatment or conservative therapy.; see attached clinicals; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; It is not known if the physician has directed conservative treatment for the past 4 weeks. The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; It is not known if the patient has completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has completed 4 weeks of physical therapy?; This is NOT a Medicare member.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has directed a home exercise program for at least 4 weeks.; The home treatment did include exercise, prescription medication and follow-up office visits.; Use light Bands as discussed for shoulder exercises; The patient received oral analgesics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; It is not known what type of medication the patient received.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not directed a home exercise program for at least 4 weeks.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received oral analgesics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient received joint injection(s).	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is described as chronic; The physician has not directed conservative treatment for the past 4 weeks.	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from a recent injury.; There is a suspicion of tendon, ligament, rotator cuff injury or labral tear.; Surgery or arthroscopy is scheduled in the next 4 weeks.; This is NOT a Medicare member.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is from an old injury.; The physician has directed conservative treatment for the past 4 weeks.; The patient has not completed 4 weeks of physical therapy?; The patient has been treated with medication.; The patient has not completed 4 weeks or more of Chiropractic care.; The physician has not directed a home exercise program for at least 4 weeks.; The patient received medication other than joint injections(s) or oral analgesics.; Nasaida, Tylenol	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	The requested study is a Shoulder MRI.; The request is for shoulder pain.; The pain is not from a recent injury, old injury, chronic pain or a mass. Unknown; This study is being ordered for a neurological disorder.; unknown; There has been treatment or conservative therapy.; Pain; Pt, Home exercise medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73221 Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Congenital Anomaly.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Concern for a mass and pain in the left lower leg that began a month ago.; This is not a preoperative or recent postoperative evaluation.; There is no suspicion of a lower extremity neoplasm, tumor or metastasis.; There is no suspicion of lower extremity bone or joint infection.; There is not a history of lower extremity joint or long bone trauma or injury.; This is a request for a Leg CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	n/a; This study is being ordered for a neurological disorder.; February; It is not known if there has been any treatment or conservative therapy.; They have difficulty with walking and pain in both lower legs.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Patient with history of Atherosclerotic right iliac artery with intermittent claudication - No gangrene.; Has bilateral LLE claudication with pain.; This study is being ordered for Vascular Disease.; Symptoms presented 3 years ago.; There has been treatment or conservative therapy.; Bilateral lower extremity claudication (right greater than left), pain with walking.; Amlodipine; Isosorbide; Nitroglycerin 0.4mg; Metoprolol; Cardiac cath 2019; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73700 Computed tomography, lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is Non-Diagnostic (to be used during surgery, to mold a joint replacement part, or for CT Needle Guidance); This is NOT for CT Needle Guidance (77011, 77012 or 77013); This is for Makoplasty and/or TKA or other non-surgical planning	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73706 Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for Vascular Disease.; 05/04/2022; It is not known if there has been any treatment or conservative therapy.; claudication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Moderate pain to deep palpation over left ischial spine as well as left hip over greater trochanter; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Unknown - chronic back pain and worsening left hip, buttock pain; There has been treatment or conservative therapy.; Since last visit pt has been experiencing worsening left hip, buttock pain. Pain is worse with movement and pressure. Also experiencing new right upper quadrant pain that is intermittent and not associated with meals, pt also notes it feels worse when st; Pt continues to take chronic medications without recent changes to medications. No acute events since stopping amiodarone prior to last visit.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	No improvement in symptoms with conservative therapy.; This study is being ordered for Inflammatory/ Infectious Disease.; 08-20-2021 shoulder pain;03-09-2022 knee pain; There has been treatment or conservative therapy.; ; Analgesics, oral steroids, period of rest, therapeutic exercises, and steroid injections.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	pain; swelling; This study is being ordered for trauma or injury.; 07/05/2022; There has not been any treatment or conservative therapy.; pain ;swelling; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	see attached clinical; This study is being ordered for Inflammatory/ Infectious Disease.; see attached clinical; There has been treatment or conservative therapy.; see attached clinical; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for known dislocation.; It is unknown if the dislocation is reducible.; It is unknown if the dislocation has recurred.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for known fracture.; The study is being ordered for routine follow up.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for known fracture.; The study is being ordered to evaluate a possible non union fracture.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; It is unknown if they had 2 normal xrays at least 3 weeks apart that did not show a fracture.; It is not known if the patient has had a recent bone scan.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a protective boot for at least 4 weeks.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for suspected fracture.; They had 2 normal xrays at least 3 weeks apart that did not show a fracture.; The patient has been treated with a walking cast for at least 4 weeks.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is being ordered for acute pain.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a foot MRI.; The study is being ordered for foot pain.; The study is NOT being ordered for chronic pain, acute pain, rule out tarsal coalition, known or suspected septic arthritis or osteomyelitis, tendonitis, neuroma or plantar fasciitis.	1	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; 'None of the above' were noted as an indication for knee imaging.; 'None of the above' were noted as an indication for knee imaging.	3	Apr-Jun 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	4	Apr-Jun 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal imaging study of the knee was noted as an indication for knee imaging; An X-ray showed an abnormality; The ordering MDs specialty is NOT Orthopedics.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; 'None of the above' were noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with a Wheel chair; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is being treated with an Ace bandage; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Instability was noted on the physical examination; The patient is not being treated with any of the listed items (crutches, knee immobilizer, wheel chair, neoprene knee sleeve, ace bandage, knee brace); The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; Abnormal physical examination of the knee was noted as an indication for knee imaging; Locking was noted on the physical examination; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient had 4 weeks of physical therapy, chiropractic or physician supervised home exercise in the past 3 months	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for a Knee MRI.; The patient has recently been put on non-weightbearing status (NWB) such as crutches or a wheelchair for knee problems.; The patient is being treated with Crutches; The ordering MDs specialty is NOT Orthopedics.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for a reason other than ankle pain.; The member has a recent injury.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is a suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.	5	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; Surgery or arthroscopy is not scheduled in the next 4 weeks.; There is not a suspicion of fracture not adequately determined by x-ray.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	This is a request for an Ankle MRI.; The study is requested for ankle pain.; There is NO suspicion of a tendon or ligament injury.; There is a suspicion of fracture not adequately determined by x-ray.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73720 Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	Radiology Services Denied Not Medically Necessary	Will fax in clinicals.; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; Will fax in clinicals.; It is not known if there has been any treatment or conservative therapy.; Will fax in clinicals.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; ; There has been treatment or conservative therapy.; weakness and numbness; PT, medications; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	2	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	pain ;swelling; This study is being ordered for a metastatic disease.; There are 4 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	patient pain is 8/10, at its least it is 8/10, on an;average about 8/10, and currently it is 8/10. Worsening factors include: increased physical activity; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; unknown; There has been treatment or conservative therapy.; shoulder pain, chronic pain in lower back hip pain; Recommend Physical Therapy patient is referred to physical therapy to be evaluated and treated;as per indications. The patient understands that this is an integral part of proper pain management programs.;PT treatment includes but is not limited to pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is chronic.; The member has failed a 4 week course of conservative management in the past 3 months.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73721 Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	Radiology Services Denied Not Medically Necessary	This is a requests for a hip MRI.; The request is for hip pain.; The hip pain is due to a recent injury.; There is a suspicion of tendon or ligament injury.; It is not know if surgery or arthroscopy is scheduled in the next 4 weeks.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	73725 Magnetic resonance angiography, lower extremity, with or without contrast material(s)	Radiology Services Denied Not Medically Necessary	soft tissue mass to lateral ankle- possible lipoma, hx of multiple ankle sprains causing ankle to now "give out" frequently/instability, rule out ligament/tendon tears;; This is a request for a ankle MRA (lower extremity joint MRA)	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered as a pre-op or post op evaluation.; The requested study is for pre-operative evaluation.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for an infection such as pancreatitis, appendicitis, abscess, colitis and inflammatory bowel disease.; There are known or endoscopic findings of Ulcerative Colitis.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74150 Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are clinical findings or indications of unexplained weight loss of greater than 10% body weight in 1 month; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	This is a request for CT Angiography of the Abdomen and Pelvis.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	unknown; This study is being ordered for Vascular Disease.; 05/04/2022; It is not known if there has been any treatment or conservative therapy.; claudication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdomen.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; There has been treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	; This study is being ordered for a metastatic disease.; There are 3 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	CT on 6/25/22 found mediastinal adenopathy.; There has not been any treatment or conservative therapy.; Acute sharp shooting back pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	She expresses concern due to FH of ovarian cancer and lung cancer. She also notes pain to palpation and with deep inspiration to the posterolateral aspect of the right chest wall. She did c/o left breast pain in December with subsequent neg mammogram 12/2; There has been treatment or conservative therapy; with c/o increase in soft tissue size of the right mid axillary chest wall compared to left. She has really noticed this over the last week. She also notes pain to palpation and with deep inspiration to the posterolateral aspect of the right chest wall. S; She has also noticed night sweats over the past few months. These are intermittent as well. Typically occurring in 2 week cycles. She typically has to change clothes/sheets. She denies fever, chills, weight loss, abnormal bleeding or bruising, lymphadenop; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	symptoms began in 2020 and have been ongoing and getting worse since then. It has progressed to the point she has to use a walker to ambulate.; There has been treatment or conservative therapy.; Diffuse muscle pain and all over weakness effecting and impairing quality of life. patient is only 57 years old; has to use a walker to ambulate; patient has had an EMG which showed positive for moderate neuropathy and started on Gabapention 800 mg qid. Also takes prescription steroids, uses a walker to ambulate, has been compliant with all scrips, home therapies, and office/doctor visits.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Inflammatory / Infectious Disease	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than billirubin, ketones, nitrites, hematuria/blood, glucose or protein.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; It is not known if a urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); Patient reports loss of appetite for 2 months with a few with episodes of nausea but no vomiting. Weight Loss- Early Satiety & Low ferritin.; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun







4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	unknown; There has been treatment or conservative therapy.; ; pantoprazole, avoid spicy, acidic, or tomato-based foods like chocolate, tomatoes, citrus fruits and fruit juices. Limit intake of coffee, tea, and cola. Watch your weight. Eat moderate amount of food at mealtime. Meals at least 3 to 4 hours prior to mea; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Other not listed	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	Unknown; There has not been any treatment or conservative therapy.; bone pain, pain in her breasts; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Inflammatory/ Infectious Disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	75557 Cardiac magnetic resonance imaging for morphology and function without contrast material;	Radiology Services Denied Not Medically Necessary	This is a request for a heart or cardiac MRI	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	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)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for Vascular Disease.; 1/2/2018; It is not known if there has been any treatment or conservative therapy.; chest pain; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdominal arteries.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	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	Radiology Services Denied Not Medically Necessary	; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	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	Radiology Services Denied Not Medically Necessary	Patient here in office today as new patient to establish care, was referred by PCP Dr. Steve Wampler, patient stated PCP advised her that she had a murmur. Last visit I ordered TTE which demonstrated normal LVEF and trival AI She has been told that she ha; This is NOT a Medicare member.; This is a request for a Heart PET Scan with CT for Attenuation.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study);. The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	52 y.o. Caucasian female is here today for follow up for hypertension, hypertensive heart disease, left ventricular diastolic dysfunction, mitral and tricuspid regurgitation, hypercholesterolemia, smoking, and family history of CAD. The patient reports ch; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has not had other testing done to evaluate new or changing symptoms.; The patient has 2 cardiac risk factors; The study is requested for congestive heart failure.; There are new or changing cardiac symptoms including atypical chest pain (angina) and/or shortness of breath.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is less than 20	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	56-year-old white male who presents with recurrent episodes of left precordial sharp chest pain associated with dyspnea, moderate to severe in intensity, patient cannot be specific about timing, resolution is spontaneous. Symptoms are randomly occurring w; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	ER VISIT FOLLOW UP FOR CHEST PAIN, PT WAS SEEN WITH HISTORY OF HTN, SMOKING, EKG SHOWS SINUS TACHYCARDIA LOW VOLTAGE QRS AND BORDERLINE ECG, HIGH NORMAL RANGE OF TROPONIN.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is less than 20	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Normal sinus rhythm. Septal lateral subepicardial ischemia. Lateral subendocardial injury.; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 20 to 29	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	occasional substernal chest pain, radiates into his jaw, shortness of breath with exertion, occasional dizziness with exertion, ekg showed st depression; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	Patient comes to the clinic today for edema, hypertension-states that she ran out of her lasix. Did not realize that we wanted her on this routine. About week after being off-swelling returned mild to the hands and feet, blood pressure is up but in normal; This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The patient has 3 or more cardiac risk factors; The study is requested for congestive heart failure.; The study is requested for suspected coronary artery disease.; The member has known or suspected coronary artery disease.; The BMI is 30 to 39	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is not requested for pre op evaluation, cardiac mass, CHF, septal defects, or valve disorders.; It is not known if the member has known or suspected coronary artery disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78451 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); single study, at rest or stress (exercise or pharmacologic)	Radiology Services Denied Not Medically Necessary	This is a request for Myocardial Perfusion Imaging (Nuclear Cardiology Study).; The study is requested for known or suspected valve disorders.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78813 Positron emission tomography (PET) imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Restaging following therapy or treatment for suspected metastasis; 2 PET Scans have already been performed on this patient for this cancer.; This study is being requested for Lymphoma or Myeloma.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78813 Positron emission tomography (PET) imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is not being ordered for Cervical CA, Brain Cancer/Tumor or Mass, Thyroid CA or other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This PET Scan is being requested for Initial Staging; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	2	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested to Confirm or establish a diagnosis of Cancer; 1 PET Scans has already been performed on this patient for this cancer.; This study is being requested for Lung Cancer.; This is NOT a Medicare member.; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for a neurological disorder.; 04/05/2022; There has been treatment or conservative therapy.; Facial numbness has a TIA and headaches; Medication; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	Patient has ST-T changes, overweight and smokes, chest pain at Rest, Irregular heartbeat; This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 03/14/22; There has been treatment or conservative therapy.; Hypertension chest pain, history of cardiac death; cardio, exercise and diet; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of congestive heart failure (CHF)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for evaluation of the heart's response to high blood pressure.; There are new symptoms suggesting worsening of heart valve disease	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; The member is 15 or older.; This study is being ordered for none of the above or don't know.; The ordering provider's specialty is NOT Rheumatology.; This study is being ordered for none of the above or don't know.; The member has NOT tested positive for Coronavirus (Covid 19)	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Cardiac Embolism.	1	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	Radiology Services Denied Not Medically Necessary	This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	3	2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	Diagnosed with hypertension, pure hyper cholesterol emia, and smokes cigarettes; This is a request for a Stress Echocardiogram.; The patient had cardiac testing including Stress Echocardiogram, Nuclear Cardiology (SPECT/MPI), Coronary CT angiography (CCTA) or Cardiac Catheterization in the last 2 years.; The patient is not experiencing new or changing cardiac symptoms.; The member has known or suspected coronary artery disease.	1	2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	Enter answer here - or Type In Unknown If No Info Given. This study is being ordered for something other than: known trauma or injury, metastatic disease, a neurological disorder, inflammatory or infectious disease, congenital anomaly, or vascular disease.; 10/25/2021; It is not known if there has been any treatment or conservative therapy.; abdominal and chest pain, Urinary hesitancy and intermittency.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; New symptoms suspicious of cardiac ischemia or coronary artery disease best describes the patients clinical presentation.; The patient has None of the above physical limitations	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; The member does not have known or suspected coronary artery disease	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	Radiology Services Denied Not Medically Necessary	Perform Body Part selection; First Pass; Body Part for first pass is Knee; Knee selected as the specific body part; Body Part pass complete; One Body Part selected; Lower Extremity/Hip selected as the body type/region; Previous auth data retrieved, type of habilitation = Rehabilitative; three or more visits anticipated; The previous auth did not address any body parts; Three or more visits anticipated; This is not a gold-card auth; Questions about the subsequent request: ; Physical or Occupational therapy was selected; The member's plan does not require the collection of start and end dates	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	Radiology Services Denied Not Medically Necessary	; This is a request for MRCP.; There is no reason why the patient cannot have an ERCP.	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Unknown	Disapproval	S8037 MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Inflammatory/ Infectious Disease.; ; It is not known if there has been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	70480 Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material		"This request is for orbit, sella, int. auditory canal,temporal bone, mastoid, CT.239.8"; "There is suspicion of bone infection, cholesteatoma, or inflammatory disease.ostct"	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material		This request is for a Brain MRI; The study is NOT being requested for evaluation of a headache.; The patient had an audiogram.; The results of the audiogram were abnormal.; It is unknown why this study is being ordered.; The patient has hearing loss.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material		'None of the above' describes the reason for this request.; Surveillance of a known cancer following treatment is related to this request for imaging of a known cancer or tumor; This is a request for a Chest CT.; This study is beign requested for known cancer or tumor; Yes this is a request for a Diagnostic CT	Apr-Jun 2 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material		2/11/2022; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material		02/12/2021; There has been treatment or conservative therapy.; UNKNOWN, NO INFORMATION GIVEN AS TO SYMPTOMS; 2/12/2021SurgeryDV R Partial Nephrectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material		03/01/2022; There has not been any treatment or conservative therapy.; elivated PSA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material		07/14/2020; There has been treatment or conservative therapy.; URGENCY OF URINATION, GLEASON SCORE OF 9W WITH A GRADE 3 LESION; LUPRON INJECTIONS, DEPO PROVERA INJECTIONS, AND XTANDI; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material	08/18/2021; There has been treatment or conservative therapy.; BACK PAIN AND CLAMMY.AFTER DISCHARGED HOME 2 hospitalizations with a febrile illness.; PT HAD TURB 08/31/21 AND radical cystoprostatectomy and ileal conduit urinary diversion ON 02/24/22.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	4 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material	A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for known tumor.	5 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material	follow up for renal cell carcinoma and hematuria; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material	January 2014; There has been treatment or conservative therapy.; gross hematuria, dysuria, urgency, incontinence; tumor ablation and BCG treatment; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71250 Computed tomography, thorax; without contrast material	They did not have a previous Chest x-ray.; A Chest/Thorax CT is being ordered.; Yes this is a request for a Diagnostic CT ; This study is being ordered for work-up for suspicious mass.; There is radiographic evidence of lung, mediastinal mass, or physical evidence of chest wall mass noted in the last 90 days	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	71271 Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	This request is for a Low Dose CT for Lung Cancer Screening.; This patient has NOT had a Low Dose CT for Lung Cancer Screening or diagnostic Chest CT in the past 11 months.; The patient is between 50 and 80 years old.; This patient is a smoker or has a history of smoking.; The patient has a 20 pack per year history of smoking.; The patient is NOT presenting with pulmonary signs or symptoms of lung cancer nor are there other diagnostic test suggestive of lung cancer.; The patient has not quit smoking.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72148 Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for Neurologic deficits; This is NOT a Medicare member.; The patient has Dermatomal sensory changes on physical examination	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72192 Computed tomography, pelvis; without contrast material	Enter answer here - or Type In Unknown if No Info Given. This study is being ordered for some other reason than the choices given.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72192 Computed tomography, pelvis; without contrast material	LEFT INGUINAL HERNIA; This study is being ordered for some other reason than the choices given.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72192 Computed tomography, pelvis; without contrast material	Patient has had right flank pain in early to mid March. renal ultrasound from 3/25/2022 revealed moderate right hydro and left 1.8cm lower pole stone. Distal right ureteral stone. History of nephrolithiasis in the past over 10 years.; This study is being ordered for some other reason than the choices given.; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72192 Computed tomography, pelvis; without contrast material	The patient is not undergoing active treatment for cancer.; This study is being ordered for known tumor, cancer, mass, or rule-out metastasis.; "The ordering physician is an oncologist, urologist, gynecologist, gastroenterologist or surgeon or PCP ordering on behalf of a specialist who has seen the patient."; This study is not being ordered for initial staging.; The patient is presenting new signs (e.g. lab findings or imaging) or symptoms; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72192 Computed tomography, pelvis; without contrast material	This study is being ordered due to known or suspected infection.; "The ordering physician is a surgeon, gynecologist, urologist, gastroenterologist, or infectious disease specialist or PCP ordering on behalf of a specialist who has seen the patient."; This is a request for a Pelvis CT.; Yes this is a request for a Diagnostic CT	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	3 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	continuous psa rising; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	1 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	elevated psa trend; This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	1 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	elevated psa; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Mr. James is a 61 yr old male referred today as a new patient for elevated PSA. His most recent PSA level was 4.5 on;12/21/21. He reports urinary sx's of frequency and nocturia x3-4.; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	none given; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	prostate cancer per the pathology report.; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	see attached clinicals Elevated PSA; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; Surgery is planned for within 30 days.; The study is being ordered for Evaluation of the pelvis prior to surgery or laparoscopy.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A tumor or mass was noted on previous imaging.; An abnormality was found in the ovary.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	72196 Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 16 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74150 Computed tomography, abdomen; without contrast material	follow up for renal cell carcinoma and hematuria; This study is being ordered for a metastatic disease.; There are 2 exams are being ordered.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; Yes, this is a request for follow up to a known tumor or abdominal cancer.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; Yes, this is a request for follow up to a known tumor or abdominal cancer.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 5 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for a suspicious mass or tumor.; There is a suspicious mass found using Ultrasound, IVP, Endoscopy, Colonoscopy, or Sigmoidoscopy.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74150 Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc..; There are clinical findings or indications of Hematuria.; Yes this is a request for a Diagnostic CT ; This is a Medicare member.	Apr-Jun 2 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74150	Computed tomography, abdomen; without contrast material	This is a request for an Abdomen CT.; This study is being ordered for another reason besides Kidney/Ureteral stone, ;Known Tumor, Cancer, Mass, or R/O metastases, Suspicious Mass or Tumor, Organ Enlargement, ;Known or suspected infection such as pancreatitis, etc...; There are no findings of Hematuria, Lymphadenopathy,weight loss,abdominal pain,diabetic patient with gastroparesis; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	02/12/2021; There has been treatment or conservative therapy.; UNKNOWN, NO INFORMATION GIVEN AS TO SYMPTOMS; 2/12/2021SurgeryDV R Partial Nephrectomy; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	03/01/2022; There has not been any treatment or conservative therapy.; elevated PSA; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	07/14/2020; There has been treatment or conservative therapy.; URGENCY OF URINATION, GLEASON SCORE OF 9W WITH A GRADE 3 LESION; LUPRON INJECTIONS, DEPO PROVERA INJECTIONS, AND XTANDI; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	08/18/2021; There has been treatment or conservative therapy.; BACK PAIN AND CLAMMY.AFTER DISCHARGED HOME 2 hospitalizations with a febrile illness.; PT HAD TURB 08/31/21 AND ;radical cystoprostatectomy and ileal conduit urinary diversion ON 02/24/22.; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	January 2014; There has been treatment or conservative therapy.; gross hematuria, dysuria, urgency, incontinence; tumor ablation and BCG treatment; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	25	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were normal.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	9	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	11	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for acute pain; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176	Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the urinalysis results were normal or abnormal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; It is not known if the pain is acute or chronic.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for hematuria/blood.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	3	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for acute pain.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; It is unknown if the patient had an Amylase or Lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were normal.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The last Abdomen/Pelvis CT was performed within the past 10 months.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient does not have a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient does not have Crohn's Disease, Ulcerative Colitis or Diverticulitis.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is infection.; The patient has a fever and elevated white blood cell count or abnormal amylase/lipase.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is known tumor.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	13	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is known tumor.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	7	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); FOREIGN BODY IN GENITOURINARY TRACT; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); patient has a non function kidney. follow up imaging to evaluate.; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); RECURRENT UTI; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is organ enlargement.; There is ultrasound or plain film evidence of an abdominal organ enlargement.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is not presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The last Abdomen/Pelvis CT was performed more than 10 months ago.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; It is unknown if the patient has completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; The patient is presenting new symptoms.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient had an abnormal abdominal Ultrasound, CT or MR study.; The patient has NOT completed a course of chemotherapy or radiation therapy within the past 90 days.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is suspicious mass or suspected tumor or metastasis.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; It is not known if a pelvic exam was performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; A contrast/barium x-ray has NOT been completed.; It is unknown if the patient have an endoscopy.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an amylase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient had an lipase lab test.; The results of the lab test were abnormal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	38	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; It is unknown if this study being ordered for a concern of cancer such as for diagnosis or treatment.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	57	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	28	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	29	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for hematuria.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; This study is NOT being ordered to evaluate an undescended testicle in a male.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for known or suspected infection.; There are physical findings or abnormal blood work consistent with pancreatitis.; A lipase abnormality was noted.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for follow-up.; The patient did NOT have chemotherapy, radiation therapy or surgery in the last 3 months.; They did NOT have an Abdomen MRI in the last 10 months.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for Known Tumor.; This study is being ordered for staging.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A abnormality was found on the spleen during a previous CT, MRI or Ultrasound.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A kidney abnormality was found on a previous CT, MRI or Ultrasound.; The patient has a tumor.	4	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	74181 Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)		This request is for an Abdomen MRI.; This study is being ordered for suspicious mass or suspected tumor/ metastasis.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.; A liver abnormality was found on a previous CT, MRI or Ultrasound.; There is suspicion of metastasis.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is not being ordered for None of the above.; This is for a PET Scan with 18F-Fluciclovine (Axumin)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being ordered for something other than listed above.; This study is not being ordered for None of the above.; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer.; This study is being requested for Prostate Cancer.; This PET Scan is being requested for Initial Staging; This is for a PET Scan with PSMA (Pylarify)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		A biopsy substantiated the cancer type; This Pet Scan is being requested for Suspected or Known Cancer; This study is being requested for Prostate Cancer.; This PET Scan is being requested for Restaging following therapy or treatment for new signs or symptoms; This is for a PET Scan with PSMA (Pylarify)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with 18F-Fluciclovine (Axumin)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with Another Tracer	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with PSMA (Pylarify)	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This patient is enrolled in the Imaging Dementia - Evidence for Amyloid Scanning (IDEAS) clinical trial.; This is a Medicare member.; This study is being requested for Alzheimer's Disease; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This PET Scan is being requested for Initial Staging; This would be the first PET Scan performed on this patient for this cancer.; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is being requested for Head/Neck/Brain Cancer, Tumor or Mass.; This is a Medicare member.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This is a request for a Tumor Imaging PET Scan; This study is being ordered for something other than Breast CA, Lymphoma, Myeloma, Ovarian CA, Esophageal CA, Lung CA, Colorectal CA, Head/Neck CA, Melanoma, Soft Tissue Sarcoma, Pancreatic CA or Testicular CA.; This study is not being ordered for Cervical CA, Brain Cancer/Tumor or Mass, Thyroid CA or other solid tumor.; This is a Medicare member.; This study is being requested for None of the above; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	4	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This nodule is New (recently diagnosed); The nodule is calcified (full or partial); This Pet Scan is being requested for a Pulmonary Nodule; This is for a Routine/Standard PET Scan using FDG (fluorodeoxyglucose)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Approval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		This Pet Scan is being requested for Other; This is for a PET Scan with Dotatate (Gallium GA 68-Dotatate)	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	70551 Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	Radiology Services Denied Not Medically Necessary	This request is for a Brain MRI; Changing neurologic symptoms best describes the reason that I have requested this test.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	71250 Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	12/06/2004; There has been treatment or conservative therapy.; To check on the possible spread of a known cancer and no recurrence.; Excision of the Right Kidney; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	1	2022	2022	Apr-Jun

4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	2006; There has been treatment or conservative therapy.; elevated PSA, lung nodule; partial cystectomy, BCG; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	71250	Computed tomography, thorax; without contrast material	Radiology Services Denied Not Medically Necessary	Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72148	Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	Radiology Services Denied Not Medically Necessary	The study requested is a Lumbar Spine MRI.; The patient does NOT have acute or chronic back pain.; This study is being requested for None of the above	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	3/30/22 PSA 7.73 nocturia and difficulty with urinating;enlarged prostate; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Assessment;;1. Elevated PSA: new diagnosis, PSA trend: 7.39 (12/6/21), 7.71 (12/3/21);2. Right Prostate Nodule: new diagnosis, noted per DRE (5/6/22);3. FHx of PCa: pt reports 2 uncles had prostate cancer, now have passed away;4. ED: stable, currently; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	Elevated psa trend; This is a request for a Pelvis MRI.; The study is being ordered for something other than suspicion of tumor, mass, neoplasm, metastatic disease, PID, abscess, Evaluation of the pelvis prior to surgery or laparoscopy, Suspicion of joint or bone infect	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	see attached clinicals; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	The patient has a history of elevated PSA at 9. No prostatitis concerns. PSA came down to 5.9 but was still elevated for his age. Most recent PSA 5.3. The patient also reports continued urinary symptoms of urinary frequency/urgency. Nocturia which is not ; This is a request for a Pelvis MRI.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; An abnormality was found in something other than the bladder, uterus or ovary.; The patient had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 3 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	Radiology Services Denied Not Medically Necessary	This is a request for a Pelvis MRI.; The study is being ordered for suspicion of tumor, mass, neoplasm, or metastatic disease.; The patient has NOT had previous abnormal imaging including a CT, MRI or Ultrasound.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74150	Computed tomography, abdomen; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen CT.; This study is being ordered for a known tumor, cancer, mass, or rule out metastases.; Yes, this is a request for follow up to a known tumor or abdominal cancer.; Yes this is a request for a Diagnostic CT ; This is NOT a Medicare member.	Apr-Jun 4 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	2/11/2022; There has not been any treatment or conservative therapy.; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	12/06/2004; There has been treatment or conservative therapy.; To check on the possible spread of a known cancer and no recurrence.; Excision of the Right Kidney; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176	Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	2006; There has been treatment or conservative therapy.; elevated PSA, lung nodule; partial cystectomy, BCG; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology; This is a request for CT of the Abdomen/Pelvis and Chest ordered in combination?; This study is being ordered for Cancer/ Tumor/ Metastatic Disease	Apr-Jun 1 2022 2022

4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were abnormal.; The urinalysis was positive for ketones.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; The results of the urinalysis were normal.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has been completed.; This study is being requested for abdominal and/or pelvic pain.; The results of the urinalysis were abnormal.; The urinalysis was positive for something other than bilirubin, ketones, nitrites, hematuria/blood, glucose or protein.; The study is being ordered for chronic pain.; This is the first visit for this complaint.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; The reason for the study is renal calculi, kidney or ureteral stone.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	3 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; A urinalysis has not been completed.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; It is not known if this is the first visit for this complaint.; There has not been a physical exam.; The patient did not have a amylase or lipase lab test.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); OVERACTIVE BLADDER;DYSURIA; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); RECURRENT UTI; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; Reason: ELSE (system matched response); TESTICULAR PAIN; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is pre-op or post op evaluation.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; It is not known if the pain is acute or chronic.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is male.; A rectal exam was not performed.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	3 2022 2022	Apr-Jun 2022
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were normal.; The patient had an Ultrasound.; The Ultrasound was normal.; It is unknown if a contrast/barium x-ray has been completed.; It is unknown if the patient have an endoscopy.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun 2022

4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is male.; It is not known if a rectal exam was performed.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; It is unknown if the patient had an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The patient did NOT have an abnormal abdominal Ultrasound, CT or MR study.; Yes this is a request for a Diagnostic CT ; There is NO documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; The study is requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	3 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is not being requested for abdominal and/or pelvic pain.; Yes this is a request for a Diagnostic CT ; There is documentation of a known tumor or a known diagnosis of cancer; This is study being ordered for a concern of cancer such as for diagnosis or treatment.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Urology	Disapproval	78816 Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	Radiology Services Denied Not Medically Necessary	This is a request for a Tumor Imaging PET Scan; This is for a PET Scan with PSMA (Pylarify)	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	70496 Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing		This 76 year old male presents for Carotid stenosis.;76-year-old gentleman here today for new patient evaluation of carotid stenosis. He had a carotid Doppler back in April performed at White River health system with velocities elevated at 544 cm/s / 21; This study is being ordered for Vascular Disease.; This 76 year old male presents for Carotid stenosis.;76-year-old gentleman here today for new patient evaluation of carotid stenosis. He had a carotid Doppler back in April performed at White River health system with velocities elevated at 544 cm/s / 21; There has not been any treatment or conservative therapy.; Velocity change in Carotid's;S/P CABG; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing		This 76 year old male presents for Carotid stenosis.;76-year-old gentleman here today for new patient evaluation of carotid stenosis. He had a carotid Doppler back in April performed at White River health system with velocities elevated at 544 cm/s / 21; This study is being ordered for Vascular Disease.; This 76 year old male presents for Carotid stenosis.;76-year-old gentleman here today for new patient evaluation of carotid stenosis. He had a carotid Doppler back in April performed at White River health system with velocities elevated at 544 cm/s / 21; There has not been any treatment or conservative therapy.; Velocity change in Carotid's;S/P CABG; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	70498 Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing		Yes, this is a request for CT Angiography of the Neck.	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71250 Computed tomography, thorax; without contrast material		A Chest/Thorax CT is being ordered.; This study is being ordered for non of the above.; Yes this is a request for a Diagnostic CT ; The study is being ordered for none of the above.	2 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71250 Computed tomography, thorax; without contrast material		Abnormal finding on examination of the chest, chest wall and or lungs describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71250 Computed tomography, thorax; without contrast material		Abnormal imaging test describes the reason for this request.; This is a request for a Chest CT.; Yes this is a request for a Diagnostic CT	1 2022 2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing		Focal outpouching of the distal aortic arch; This study is not requested to evaluate suspected pulmonary embolus.; This study will not be performed in conjunction with a Chest CT.; This study is being ordered for Known Vascular Disease.; This is a post-operative evaluation.; There is no physical evidence of re-bleed or re-stenosis.; There is physical evidence of an infection or other complication.; Yes, this is a request for a Chest CT Angiography.	1 2022 2022	Apr-Jun



4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	GSW to chest with SCA ligation; This study is being ordered for trauma or injury.; 4/11/2022; There has been treatment or conservative therapy.; male s/p GSW to the chest on 4/12 with PMHx of asthma. Patient taken immediately to OR with vascular/trauma team for SCA. Found to have transection/occlusion of L SCA; male s/p GSW to the chest on 4/12 with PMHx of asthma. Patient taken immediately to OR with vascular/trauma team for SCA. Found to have transection/occlusion of L SCA. Underwent proximal endovascular embolization, distal open ligation proximal to vertebr; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	The ordering MDs specialty is Vascular Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Other not listed; The ordering MDs specialty is Vascular Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Vascular Disease; The ordering MDs specialty is Vascular Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	73206 Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	GSW to chest with SCA ligation; This study is being ordered for trauma or injury.; 4/11/2022; There has been treatment or conservative therapy.; male s/p GSW to the chest on 4/12 with PMHx of asthma. Patient taken immediately to OR with vascular/trauma team for SCA. Found to have transection/occlusion of L SCA; male s/p GSW to the chest on 4/12 with PMHx of asthma. Patient taken immediately to OR with vascular/trauma team for SCA. Found to have transection/occlusion of L SCA. Underwent proximal endovascular embolization, distal open ligation proximal to vertebr; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	The ordering MDs specialty is Vascular Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This is a request for CT Angiography of the Abdomen and Pelvis.	Apr-Jun 7 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Other not listed; The ordering MDs specialty is Vascular Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	74174 Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	This study is being ordered for Vascular Disease; The ordering MDs specialty is Vascular Surgery; The member has a known Thoracic and or Abdominal Aortic Aneurism documented by other imaging such as CT scan, MRI, or Transthoracic Echocardiography; This imaging request is NOT for preoperative planning for Aortic Aneurysm repair surgery; This is a request for an Abdomen CTA , Chest CTA and Pelvis CTA ordered in combination	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; The reason for the study is none of the listed reasons.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	74176 Computed tomography, abdomen and pelvis; without contrast material	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for acute pain.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam are unknown.; Yes this is a request for a Diagnostic CT	Apr-Jun 1 2022 2022
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Yes, this is a request for CT Angiography of the abdominal arteries.	Apr-Jun 7 2022 2022



4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for an echocardiogram.; This is a request for a Transthoracic Echocardiogram.; This study is being ordered for Evaluation of Pulmonary Hypertension.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; Don't know or Other than listed above best describes the reason for ordering this study.	2	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; The onset or change in symptoms is unknown; Other cardiac stress testing such as Exercise Treadmill, Myocardial Perfusion Imaging, or Stress Echocardiogram has been completed; Other cardiac stress testing was completed More than 6 months ago; New or changing symptoms of chest pain, shortness of breath, or PVCs (Premature Ventricular Contractions) best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Approval	93307 Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography		This is a request for a Transthoracic Echocardiogram.; This case was created via RadMD.; Agree; There is known valvular heart disease.; The last Transthoracic Echocardiogram was more than 6 months ago.; The patient's valvular heart disease is moderate to severe.; Pre-existing murmur best describes the reason for ordering this study.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Disapproval	71275 Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Disapproval	74175 Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	Yes, this is a request for CT Angiography of the abdomen.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; The reason for the study is vascular disease.; There is known or suspicion of an abdominal aortic aneurysm.; This study is not being requested for abdominal and/or pelvic pain.; The study is not requested for hematuria.; Yes this is a request for a Diagnostic CT ; This is study NOT being ordered for a concern of cancer such as for diagnosis or treatment.	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Disapproval	74176 Computed tomography, abdomen and pelvis; without contrast material	Radiology Services Denied Not Medically Necessary	This is a request for an Abdomen and Pelvis CT.; This study is being requested for abdominal and/or pelvic pain.; The study is being ordered for chronic pain.; This is not the first visit for this complaint.; There has been a physical exam.; The patient is female.; A pelvic exam was performed.; The results of the exam were abnormal.; Yes this is a request for a Diagnostic CT	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Disapproval	75635 Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	Radiology Services Denied Not Medically Necessary	; This study is being ordered for Vascular Disease.; ; There has been treatment or conservative therapy.; ; ; The ordering MDs specialty is NOT Hematologist/Oncologist, Thoracic Surgery, Oncology, Surgical Oncology or Radiation Oncology	1	2022	2022	Apr-Jun
4/1/2022 - 6/30/2022	4/1/2022	Vascular Surgery	Disapproval	93350 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;	Radiology Services Denied Not Medically Necessary	This is a request for a Stress Echocardiogram.; None of the listed reasons for the study were selected; The member does not have known or suspected coronary artery disease	1	2022	2022	Apr-Jun